



Direct Deposit Request Form

University policy: All faculty, staff and students of Drury University will receive payment through direct deposit. The university will deposit your earnings into any bank, credit union or savings and loan of your choice. To participate in direct deposit, read and sign the direct deposit authorization statement and attach a canceled check to the bottom portion of this form.

Last Name _____ First Name _____ Drury/Student ID# _____

Date you want this to take effect: Immediately OR in the future, effective date _____

Action: New (if starting) Change (different account) Delete (if stopping)

Direct deposit authorization—please check each box after reading the paragraph.

I understand the first paycheck will be a pre-note to the bank and will not be automatically deposited into my account. I understand the first paycheck will be a regular paycheck and the second paycheck will automatically be deposited into the account listed below. This authorization will continue for the duration of my employment or until the payroll office receives a signed request to change or discontinue my participation. The receipt of my pay stub will be my official notification that the transfer of funds from Drury University to my account has occurred.

I understand when I make alterations to my bank account I must inform the payroll office a month in advance and provide a new direct deposit request form. In addition, any changes made will be confirmed by the payroll office through phone contact before the change can be implemented.

I understand that if the bank reports an error on the electronic test of my account info, I will be contacted to resubmit my information and a retest will be performed after receiving resubmitted information. I understand I will receive another paper check on the next payroll if this happens.

I understand that Drury University assumes no responsibility for errors or delays by a financial institution in crediting accounts or for my failure to notify the payroll office that my account has been closed.

I have read this authorization and direct Drury University to start, change or stop direct deposit of my pay as indicated above.

Signature _____

Date _____

Please attach a voided check or write your account information in the area provided.

PLEASE PRINT CLEARLY!

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____

Please return to:
Drury University
Human Resources
900 North Benton
Springfield, Missouri 65802

If attaching a check, please write
"VOID" across the check and
staple it to the bottom of this form.