

ST. LAWRENCE UNIVERSITY

Faculty/Staff Direct Deposit Form

NAME: _____ SS# _____ - _____ - _____

I wish to have my check deposited electronically to the following account(s):

BANK INFORMATION

Name of Bank: _____ Name of Bank: _____

Bank Routing #: _____ Bank Routing #: _____

Account Number: _____ Account Number: _____

Checking or Savings _____ Amount/Percent*
(circle one)

Name of Bank: _____ Name of Bank: _____

Bank Routing #: _____ Bank Routing #: _____

Account Number: _____ Account Number: _____

Checking or Savings _____ Amount/Percent*
(circle one)

*NOTE: If deposit is to more than two accounts, only amounts (not percentages) may be specified. Flat amounts will be credited to just accounts listed and the remaining balance to the last account listed.

Please select an option for your pay stub distribution:

fo send to Facilities Operations
sec send to Security
pkup pick up at Business Office
can send to Canaras

ds send to Dining Services
cmr send via Campus Mail

Date: _____ Signature: _____

** National Automated Clearing House Association rules require that your first direct deposit transaction be for bank and account number verification purposes only; it cannot contain financial information. Therefore, after enrolling for direct deposit, you will receive one paycheck which will be available on payday at the Business Office. Then, all subsequent paychecks will be directly deposited and your pay stub will be distributed according to your selection above.