

Direct Deposit Authorization

Complete this form to enroll in or change your direct deposit settings. Please attach a voided check or bank letter verifying your account information.

Employee Information

First Name**Last Name****Employee ID****Department *****Email Address *****Phone Number**

Bank Account Information

Bank Name ***Routing Number (9 digits) *****Account Number *****Account Type *** Checking Savings

Authorization

I authorize Wiley University to deposit my pay directly to the account listed above.

Employee Signature

Sign above

Date: