

Southwestern University

Direct Deposit Form

For Payroll and Accounts Payable Payments

Please check status below:

Biweekly Staff

Monthly Faculty/Staff

Student Worker

Printed Name: _____ SU ID#: _____

Due to electronic payment file deadlines, changes received less than 5 days prior to a payroll or accounts payable payment date may result in a paper check.

I hereby authorize Southwestern University to initiate credit entries and debit entries or adjustments only if necessary to the extent any prior credit entries may have been incorrect to the following financial institutions and accounts listed below. If available, attach a voided check to this form.

Choose Reason: S = Set-up/Add account C = Change account E = End/Cancel account	Bank Name	9 Digit Bank Routing Number	Bank Account Number	Choose Acct Type: C = Checking S = Savings	Select One Option for each Account/Line below:
S or C or E				C or S	<input type="checkbox"/> Total Amount <input type="checkbox"/> \$ _____ <input type="checkbox"/> Remain. Amount
S or C or E				C or S	<input type="checkbox"/> Total Amount <input type="checkbox"/> \$ _____ <input type="checkbox"/> Remain. Amount
S or C or E				C or S	<input type="checkbox"/> Total Amount <input type="checkbox"/> \$ _____ <input type="checkbox"/> Remain. Amount

This authorization will remain in full force and effect for my payroll and accounts payable payments until Southwestern University has received written notification from me of its termination or change in such time and in such manner as to afford the University a reasonable opportunity to act on it. **I understand it is my responsibility to notify the Business Office immediately if changes occur in my account, such as switching the type of account, changing account numbers, closing accounts or changing banks.**

Signature: _____ Date: _____

Revised 6/2019