

A separate form from the Accounting Office **MUST** be completed for direct deposit of travel expenses.



Grand Valley State University Payroll Direct Deposit Authorization From

Employee Name: _____ G-Number: _____
First M.I. Last

GVSU Department: _____ Contact Phone Number: _____

Employee Classification (please check one): ☐ Full Time ☐ Part Time ☐ Student ☐ Temp

COMPLETE TO ENROLL / ADD / CHANGE BANK ACCOUNTS – PLEASE PRINT CLEARLY IN BLACK/BLUE INK ONLY

Type of Account ☐ Checking ☐ Savings Accountholders Name: _____

Routing/Transit Number: _____

Checking/Savings Account Number** _____

Financial Institution ("Bank") Name _____

I wish to deposit (check one): ☐ _____ % of Net ☐ Specific Dollar Amount \$ _____ .00 ☐ Remainder of net pay

Type of Account ☐ Checking ☐ Savings Accountholders Name: _____

Routing/Transit Number: _____

Checking/Savings Account Number** _____

Financial Institution ("Bank") Name _____

I wish to deposit (check one): ☐ _____ % of Net ☐ Specific Dollar Amount \$ _____ .00 ☐ Remainder of net pay

YOUR CHECK STUB WILL BE SENT ELECTRONICALLY TO YOUR GVSU ISSUED E-MAIL ADDRESS

For a CHECKING account:
Write VOID on an unused check and attach here.

For a SAVINGS account:
Contact your bank and obtain written verification of your account and routing numbers. Attach that verification to this form.

John and Mary Jones 123 Main Street Anytown, MI 48888		1234
Pay to: _____ \$ _____		
VOID _____ DOLLARS		
Anytown Bank Anytown, MI 48888		
For: _____		Do Not Complete Shaded Area
I: 072412345 I: 0012300456 " 1234		
Routing Number (9 digits)	Account Number (up to 17 digits)	

*Transit Routing Numbers are **always** 9 digits
• Lines for more accounts are on the reverse side of this form.

If available, please attach a voided check for each new account.

Attaching these items are optional.

Employee Confirmation Statement

IMPORTANT NOTICE ABOUT INTERNATIONAL ACH/DIRECT DEPOSIT

Due to banking regulations funds electronically deposited via Automated Clearing House (ACH) in a U.S. bank and then forwarded to a non-U.S. bank are required to include additional information. Until this additional information can be obtained, payments of this nature must be paid by paper check or will be rejected by the ACH network.

If you plan to send funds to a non-U.S. bank from one of the accounts that you use for Direct Deposit then you may send a check (not ACH). If you do use ACH to send funds to a non-U.S. bank the bank may reject your ACH and return the funds to GVSU. Grand Valley State University is not responsible for international ACH transactions that are rejected and/or delayed due to missing information.

Check here if you plan to forward your ACH to a non-US bank: ☐

I authorize Grand Valley State University and the financial institutions as signatory owner of the account(s) listed on this form to deposit my pay automatically to the accounts indicated (and only those accounts) each payday. Adjusting entries to correct errors are also authorized. ***This authority replaces any previous direct deposit authorization*** and will remain in effect until I have canceled it in writing.

 Employee Signature _____ Date _____

****Note: Digital or Electronic Signatures are not acceptable.****

FOR GVSU OFFICE USE ONLY

I confirm that the above named employee has added or changed a bank account for direct deposit transaction processed by Grand Valley State University. I have reviewed the information provided and it is accurate to the best of my knowledge. My signature below indicates that I have the authority to execute this document on behalf of the employee.

GVSU Payroll Representative _____ Date _____

GVSU Payroll Representative _____ Date _____

☐ ID ☐ OB ☐ Forms ☐ Call ☐ VM ☐ EE Confirmed _____

COMPLETE TO ENROLL / ADD / CHANGE BANK ACCOUNTS – PLEASE PRINT CLEARLY IN BLACK/BLUE INK ONLYType of Account ☐ Checking ☐ Savings

Accountholders Name:

Routing/Transit Number: _____

Checking/Savings Account Number** _____

Financial Institution ("Bank") Name _____

I wish to deposit (check one): ☐ _____% of Net ☐ Specific Dollar Amount \$_____.00 ☐ Remainder of net payType of Account ☐ Checking ☐ Savings

Accountholders Name:

Routing/Transit Number: _____

Checking/Savings Account Number** _____

Financial Institution ("Bank") Name _____

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Accountholders Name:

Routing/Transit Number: _____

Checking/Savings Account Number** _____

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