

## University of North Carolina Wilmington DIRECT DEPOSIT AUTHORIZATION FORM

**If you are enrolling in Direct Deposit:**

- Complete the authorization form below.
- The Payroll Department will confirm the deposit information through the banking system.
- The first month the enrollment is entered into the payroll system, you will continue to receive a regular paper payroll check. The following month your net pay will be automatically deposited into the accounts designated. A direct deposit notification will be sent to you by payday.

**If you are changing or adding accounts:**

- When adding a second account, your pay will be deposited into your current primary account.
- The change will be effective with the second payroll after submitting this form.

**If you are canceling Direct Deposit:**

- **VERY IMPORTANT:** Please notify the Payroll Department (using the authorization form below) **before closing any direct deposit accounts.**

I wish to:	New Enrollment	Change Name
	Cancel Direct Deposit	Change Bank
	Change Amount Only	Change Account Number (Same Bank)

**Please type or print except for signature.**

Banner ID Number (9 digits)	Employee's First Name	MI	Last Name
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Social Security Number

Pursuant to the Federal Privacy Act of 1974, you are notified that disclosure of your SSN is mandatory for processing the automatic deposit.

**You may have a total of two Direct Deposits.**

Enter a dollar amount or "my net pay"	Checking	Financial Institution
1. Deposit	each pay period into my	Savings account with
Enter a dollar amount or "my net pay"	Checking	Financial Institution
2. Deposit	each pay period into my	Savings account with

**A voided check or a savings deposit slip must be attached for each account listed above.**

I authorize UNIVERSITY OF NORTH CAROLINA WILMINGTON to credit automatically to the accounts stated above on this form (OR to cancel direct deposit if so indicated above). This authorization is to remain in effect until revoked by me in writing or until I terminate my employment with the University.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

Return this form to:  
University of North Carolina Wilmington  
Payroll Office – Hoggard Hall Room 160  
601 South College Road  
Wilmington, NC 28403-5998