BPP Update HRConnect Update

DIRECT DEPOSIT AUTHORIZATION FORM

(Payroll Payments only)

EMPLOYEE IDENTIFICATION – To be completed by employee

Name:	UIN:
E-mail:	Home Phone:
Department:	Work Phone:

FINANCIAL IDENTIFICATION: To be completed by employee or financial institution representative

☑ Attach a voided check for checking account deposits

ACTION REQUESTED	Name of Financial Institution:	Phone:
□ Initial Set-up	Bank Address:	
	Electronic Deposit Routing Number (obtain from bank):	
□Yes □ No	Will these payments be forwarded to a financial institution outside the United States?	
□ Change	Account Number:	
Decline	I would like to receive a paper check.	
	Indicated account type below:	
Cancel	Checking Savings	

Note: It is the employee's responsibility to provide accurate routing and account number information. If in doubt, contact your financial institution to ensure accuracy prior to submitting this form. Please print clearly and legibly to prevent errors.

EMPLOYEE AUTHORIZATION – PLEASE READ AND SIGN

I authorize Texas A&M University-Commerce (TAMU-C) to deposit by electronic transfer my payroll amounts to the financial institution and account indicated above. I acknowledge responsibility for providing complete and accurate information on this authorization form and understand that TAMU-C may contact my financial institution to confirm accuracy of information. *I also acknowledge that I will receive an electronic notification of earnings from TAMU-C which will be an email confirming that my payroll data is available on HRConnect. I understand that a paper retainer will not be printed and distributed for me unless I elect not to participate in this feature by checking the following box.* This authorization is to remain in effect until I provide written notice of cancellation or until my employment with TAMU-C terminates. TAMU-C reserves the right to reverse an incorrect posting; however, I fully understand that TAMU-C must notify me on or before the settlement date (payday) and explain the reason for the reversal. I further understand that if changes occur in my account, i.e., switching deposit from checking to savings, closing account, changing banks, etc. it is my responsibility to contact Payroll Services immediately.

Signature:_____

Date:_____

FOR ASSISTANCE, CALL: Payroll Office (903)886-5282 RETURN FORM TO: Payroll Office B.A. 180 OR MAIL TO: Payroll Office Texas A&M University-Commerce P.O. Box 3011 Commerce, TX 75429

Privacy Notice: State Law requires that you be informed of the following: (1) You are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.