Xavier University of Louisiana

Department of Human Resources

DIRECT DEPOSIT

☐ *Initial Enrollment* ☐ *Change in Enrollment*

Employee's Authorization

Please fill out this form and return it to the Office of Human Resources. ***For all checking accounts, please attach a voided check or direct deposit authorization form, and for savings accounts, you are required to provide your account number on the financial institution's letterhead for verification purposes.***

Please note for your initial enrollment, your first check will not be direct deposited into your account, it will be set up as a pre-note for verification and you will receive a paper check to be picked up at the Cashier's window at Xavier South, 3rd floor. Thereafter, each check will be direct deposited into your account.

If you are changing your checking/savings account, your first check after the change will be a paper check. Thereafter, each check will be direct deposited into your account.

I authorize you and the financial institution listed below to initiate electronic credit entries and if necessary, debit entries and adjustments for any credit entries in error each pay day to my:

☐ *Checking Account* ☐ *Savings Account*

This authorization will remain in effect until I have cancelled it in writing.

TRANSIT ROUTING NUMBER	*ACCOUNT NUMBER*

CANCELLATION OF DIRECT DEPOSIT

Effective _____, please cancel my direct deposit with _____

Date ***Financial Institution***

_____. Thanks in advance for your cooperation.

Account Number

Print Name: _____ ***Xavier ID Number:*** _____

Signature: _____ ***Date:*** _____

****PLEASE READ***

****BY CANCELLING YOUR DIRECT DEPOSIT, YOU WILL BE REQUIRED TO OPEN A NEW CHECKING OR SAVINGS ACCOUNT OR APPLY FOR A DEBIT CARD ISSUED BY A XAVIER AUTHORIZED FINANCIAL INSTITUTION.***