

FORDHAM UNIVERSITY

Office of Student Employment
Thebaud Hall, 1st Floor
Bronx, New York 10458

DIRECT DEPOSIT APPLICATION

Please **check one** of the boxes below:

Start Direct Deposit ____ Stop Direct Deposit ____ Change Bank ____ Change A/C# ____

Name: _____ Campus: _____

FIDN #: _____ Telephone #: _____

Please choose one of the following:

CHECKING ACCOUNT INFORMATION

SAVINGS ACCOUNT INFORMATION

Bank Name: _____

Bank Name: _____

Routing #: _____

Routing #: _____

Account #: _____

Account #: _____

Instructions: Please staple a **VOIDED CHECK** from your Checking Account OR **DEPOSIT SLIP** from your Savings Account to this form. The check or deposit slip must include the Bank's Routing # and the Account #. Your Direct Deposit **cannot** be processed without this information.

I hereby authorize Fordham University to electronically deposit my net pay into the account indicated above on each payday. If funds, to which I am not entitled to, are deposited, I authorize my bank to honor my employer's instructions to refund any amount it has deposited into my account. This authorization will remain in effect until I have cancelled it in writing.

Employee Signature: _____ Date: _____

PLEASE NOTE: For your first payment you will receive a paycheck. If Routing and Account numbers are correct, all paychecks thereafter should be directly deposited.