



STUDENT PAYROLL
DIRECT DEPOSIT AUTHORIZATION

I hereby authorize and request the University of New Haven to make payment of any amounts owing to me for Payroll by initiating credit entries to my account indicated below in the bank named below and I authorize and request the named Bank to accept any credit entries initiated by the University to such account and to credit the same to such account without responsibility for the correctness thereof. I also authorize the University to enter a debit to my named bank account in the following circumstances and under the following conditions:

- 1. The debit entry is initiated for the purpose of correcting an erroneous credit previously initiated to my account.
2. The correcting entry is transmitted in such time as to be delivered or made available to Bank by midnight of the fifth day next following settlement to the erroneous entry, and,
3. Prior to the time the correcting entry is initiated; the University has sent or delivered to me written notification of such correction and the reason therefore.

It is understood that I may terminate this agreement at any time by written notification to the University or Bank. Any such notification to the University shall be effective only with respect to entries initiated by the University after receipt of such notification and a reasonable opportunity to act on it. Any such notification to Bank shall be effective only with respect to entries credited to my account by Bank after receipt of such notification and a reasonable time to act on it.

IMPORTANT: Bank routing and account numbers change frequently as banks are acquired or merged. The numbers on your current checks or account statements may or may not be accurate for direct deposit processing.

By signing below you are making the following statement of responsibility regarding the accuracy of the bank information:

"I will contact my bank to confirm the routing and account numbers required to process this request."

Account Type: Checking ( ) Savings ( )

Please print clearly

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Bank Routing No: (9 digits) \_\_\_\_\_

Bank Account No: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_

UNH

Email: \_\_\_\_\_ @newhaven.edu Dept: \_\_\_\_\_

Please note: Direct Deposit authorizations will be valid for the current academic year only. Banking information will be deleted at the end of the academic year.

Remember to notify payroll IMMEDIATELY of any bank account changes.

If you have questions about student payroll, direct deposit for students, or this form, please contact Payroll at:

payroll@newhaven.edu

or call the UNH Business Office at (203) 932-7230