



THE UNIVERSITY OF CHICAGO

Payroll Direct Deposit Authorization Form

Complete this form only if you do not have a University CNetID and do not have access to the Employee Self-Service web site at <https://ess.uchicago.edu>

Please note the following when using the Employee Self-Service web site to authorize direct deposit:

- New or changed direct deposit authorizations can take up to 2 pay periods.
- Cancellation of direct deposit can be completed on Employee Self-Serve.
- Payroll advices can be viewed and printed starting prior to two days before pay date.

I authorize the University of Chicago to remit my net pay to my accounts at the institution(s) indicated below. I understand the direct deposit is not completed until I receive or view my first Pay Advice.

New Direct Deposit Add an account Change a Bank or Account Cancel Direct Deposit

Required: Account to direct deposit net pay less designated additional amounts below.

Name of Bank or Financial Institution	Bank Transit Routing or ABA Number	Account Number	Indicate Account Type	
			Checking	Savings
			<input type="checkbox"/>	<input type="checkbox"/>

Optional: Additional accounts that you would like to have money deposited into.

Name of Bank or Financial Institution	Bank Routing Transit or ABA Number	Account Number	Checking or Saving Account	Amount or Percentage
			Circle C <u>or</u> S	
			Circle C <u>or</u> S	

Required: Do you intend to forward any entire payment made through direct deposit to one of the accounts listed above to a bank account outside the United States?

Yes No if yes, indicate the account(s) listed above _____

PLEASE ATTACH A VOIDED CHECK OR FINANCIAL INSTITUTION LETTER SHOWING YOUR BANK'S ROUTING AND ACCOUNT NUMBER FOR EACH ACCOUNT LISTED

MONTHLY EMPLOYEES ONLY: Select one option below to indicate your check distribution until new Direct Deposit has been established with the new account. (NOT APPLICABLE TO BIWEEKLY EMPLOYEES).

- Option 1 Continue Direct Deposit to the OLD Acct. through ___/___/___ OR until Direct Deposit has been re-established.
- Option 2 The OLD account is CLOSED. Send checks to my department until Direct Deposit is established.

This authorization is to remain in full force and effect until revoked by me in writing.

By signing this Authorization Form, you give the University permission to print a payroll check for you if it becomes necessary and to correct all overpayments to your account. Your signature releases the University of Chicago from liability should the electronic transfer not be credited to your account on Payday.

EMPLOYEE NAME: _____

EMPLOYEE ID NUMBER: _____

SIGNED: _____

DATE: _____