

This form is to be used to update or change your current direct deposit information:

- Replace your current account with a new account
- Remove one account and/or add one account
- Change the amount going into one account
- Turn off "Print Pay Statement"

For Office Use Only:	
Entered	_____
Checked	_____
CDC	_____

EMPLOYEE INFORMATION - ALL INFORMATION IN THIS SECTION IS REQUIRED

First Name _____ Last Name _____

Employee/Student ID# _____ E-mail _____ Phone _____

REPLACE CURRENT BANK ACCOUNT WITH NEW BANK ACCOUNT (Complete this section if you currently have your paycheck deposited into one bank account and you want to replace that one account with a different one.)

Check the box that matches your new account and attach the item requested:

- Checking or Money Market - attach a check with "VOID" written across it or a legible photocopy of one of your checks.
- Savings - attach a letter or preprinted form from your bank that includes you bank's routing number and your account number.

REMOVE/ADD ONE ACCOUNT (Complete this section if you currently have your paycheck deposited into multiple accounts and you want to remove or add an account.

Remove Account Add Account (see section above for required documentation)

Account # _____ Amount _____

Remove Account Add Account (see section above for required documentation)

Account # _____ Amount _____

CHANGE THE AMOUNT GOING INTO AN ACCOUNT (Complete this section if you have your paycheck deposited into multiple accounts and you want to change the amount going into one or more of these accounts.

Account # _____ Amount _____

Account # _____ Amount _____

CHANGE "PRINT" OPTION ON PAY STATEMENT

I do NOT want a copy of my pay statement printed each pay period. I will access it through MyPack Portal when necessary.

You must bring this form, along with all required documentation and a photo ID, to the University Payroll Office.

University Payroll is located in the Administrative Services II Building, 2711 Sullivan Drive, 2nd Floor.

I authorize my salary payment to be routed to the financial institution(s) listed on this form and deposited into the account(s) identified on the attached document(s). I understand and accept the conditions of participation in the direct deposit program as stated in REG05.45.1 NC State University Policies, Regulations and Rules.

PLEASE NOTE: NCSU will transmit your payment electronically based on the information you have provided. If this transmission fails because the information is incorrect or has become outdated, NCSU can only provide a replacement check AFTER the University has received a refund from your financial institution. NCSU has the right to retract and correct payments as necessary.

Signature _____ Date _____