

Yale University

Direct Deposit Request Form

Check one option:

Start Direct Deposit

Change Direct Deposit

Stop Direct Deposit

To stop, complete only Employee Information and sign

Employee Information

Name:

First

Middle

Last

SID:

Birth date:

Department:

Bank Information

Bank Name:

Type of Account (select one):

Checking

Savings

Transit Routing No.*

Account No.*

** Copy the numbers from
your check in the
locations shown here.*

Pa. Smith 9876
Shady Lane
Pay to Date __ 19 __
order of _____ Dollars
Memo _____
123456789 000012345678 9876

For Checking deposit:

Voided blank check *MUST* be attached here

For Checking deposit:
Voided blank check *MUST* be attached here

Please read the following information carefully:

I hereby authorize the direct deposit of my net pay by the University in the account and financial institution indicated. Such deposit will be made on each succeeding payday unless I choose to terminate this agreement in writing to the University. Any such notification to the University shall become effective following receipt, after a reasonable opportunity to act on it. In the event that the University erroneously deposits funds into my account, I hereby authorize it to debit my account not to exceed the original amount of the credit.

Date: _____

Note: See important information on the next page of this form

Information relating to direct deposit

1. **DO NOT** close, cancel, or change your existing bank account without first completing a new Direct Deposit Request Form or consulting with the Yale Payroll Department at 203 432-5408.
2. If you make a change to your existing Direct Deposit, it may cause you to receive an actual check for one or two pay cycles before the deposit to the new bank or account takes effect

Yale Payroll Department

P. O. Box 208228
New Haven, CT 06520-8228

Campus Address:
155 Whitney Avenue Room 100
Mail Code: 489

Phone: 203 432-5408
FAX: 203-432-6662