

The University of Tampa



Payroll Office

Payroll Electronic Direct Deposit Form

Part I Employee Information

I authorize The University of Tampa to deposit my pay to my checking or savings account(s). In the event that my employer deposit funds erroneously into my account, I authorize my employer to debit my account in the amount not to exceed the original amount of the credit. I understand that it is my responsibility to inform the payroll office of any changes in my bank accounts.

(check one) Deposit Action: New: _____ Change: _____ Stop: _____
Full Name: _____
Employee ID Number: _____ Social Security Number: _____
Department: _____
Work/Cell Phone: (____) _____

Signature: _____ Date: _____

Part II Employee Bank Information

You may deposit up to three accounts. LAST BANK SPECIFIED WILL RECEIVE THE BALANCE OF YOUR PAY.

Bank 1 Name: _____
Routing Number: _____
Account Number: _____
Account Type: Checking: _____ Savings: _____
Amount to be deposited: \$ _____

Bank 2 Name: _____
Routing Number: _____
Account Number: _____
Account Type: Checking: _____ Savings: _____
Amount to be deposited: \$ _____

Bank 3 Name: _____
Routing Number: _____
Account Number: _____
Account Type: Checking: _____ Savings: _____
Amount to be deposited: \$ _____

Part III Special Instructions

Return this form **AND** a VOIDED CHECK or a DIRECT DEPOSIT AUTHORIZATION FORM for each bank account, to the payroll office PH 407.