

This form must be submitted at the time of initial hire or anytime banking information changes. Allow two weeks for processing this request. Your pay stub may be viewed through the YSU Portal.

I, _____ authorize Youngstown State University (YSU) to initiate direct deposit of my net pay to the financial institution(s) and account number(s) specified below. In the event YSU deposits funds erroneously into my account(s), I authorize YSU to debit my account(s) for an amount not to exceed the original amount of credit. I agree to indemnify YSU against any loss sustained by me by reason of such action. I understand that YSU maintains the right to terminate, suspend, or amend the direct deposit program in whole or in part at any time.

Employee Information	Employee Name _____
	Banner ID# or SSN _____
	Campus Department _____ Phone _____

Action Requested	Select One
	<input type="checkbox"/> Enroll <input type="checkbox"/> Cancel <input type="checkbox"/> Change

Bank Information	Note: You may choose up to three financial institutions or accounts for deposit of your pay. If you choose two or more, you must specify a dollar amount to be deposited into the first account(s); the remainder of your net pay will go into the account with no dollar amount specified.			
	Select One	<input type="checkbox"/> Checking	<input type="checkbox"/> Checking	<input type="checkbox"/> Checking
		<input type="checkbox"/> Savings	<input type="checkbox"/> Savings	<input type="checkbox"/> Savings
	Bank Name	_____	_____	_____
	Bank Routing Number	_____	_____	_____
	Bank Account Number	_____	_____	_____
	Amount To Be Deposited	_____	_____	_____
Signature (Required)		Date		

Payroll Office Use Only Entered into system on _____ by _____

	<p>ATTACH YOUR VOIDED CHECK HERE</p> <p>RETURN COMPLETED FORM TO THE PAYROLL OFFICE</p>
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