

Direct Deposit Instructions and Authorization Form

How to Enroll in Direct Deposit

1. Complete the Authorization Agreement for Direct Deposit found on the next page.
2. Attach the required verification of your account (you can choose up to 3) and routing number. This would be:
 - a. A voided check for deposits to a checking account **or**
 - b. A letter from your financial institution, on their letterhead, which includes your name, your account number and your ABA or Routing number for deposit into a savings or checking accounts.
3. Deliver the completed, signed form and the attachments to the Office of Payroll, 11th floor, Howe Center.

Please note:

- Processing time for direct deposit to take effect is 2 to 3 weeks, depending on the financial institution. Until it takes effect you will receive a paycheck that will be available in your department.
- Payroll direct deposits are credited to your account on the check date.
- Direct Deposit is a joint responsibility between employer and employee. You should verify the posting of each pay check with your financial institution. Failure to do so could result in overdraft charges for which you could be liable.
- A Payroll Summary Statement will be available for your review. The statement lists gross pay, all deductions, and net deposited. To access the information on line and to terminate paper statements please visit this link:

https://www.stevens.edu/sit/sites/sit/files/ADP_ipay_statement.pdf

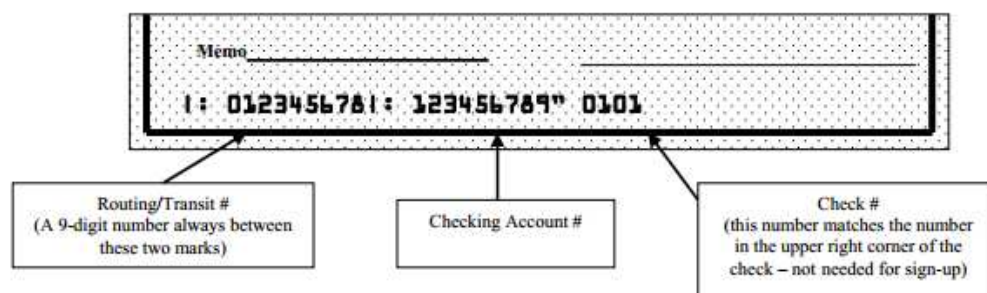
How to Change Account(s) and/or Financial Institution(s)

1. Complete the Authorization Agreement for Direct Deposit on the next page, checking the appropriate Action to be taken box
2. Attach the required verification of your account (you can choose up to 3) and routing number. This would be:
 - a. A voided check for deposits to a checking account **or**
 - b. A letter from your financial institution which includes your name, your account number and your ABA or routing/transit number for deposit into a savings or checking accounts.
3. Deliver the completed, signed form and the attachments to the Office of Payroll, 11th floor, Howe Center.

Please notes: Processing time for direct deposit to take effect is 2 to 3 weeks, depending on the financial institution. Until it takes effect you will receive a paycheck that will be available in your department

How to Terminate Direct Deposit

1. Complete the Authorization Agreement for Direct Deposit on the next page, checking the box labeled "Terminate Direct Deposit"
2. Deliver the completed, signed form to the Office of Payroll, 11th floor, Howe Center.





Division of Finance

Office of Payroll
11th floor Howe Center
Castle Point on Hudson
Hoboken, NJ 07030
(201) 216-5150
(201) 216-5137 fax

Authorization Agreement for Direct Deposit

Name (please print): _____ Department _____

Social Security Number: _____ OR Six Digit Paycheck File # (on your paycheck) _____

E-mail: _____ Daytime Phone: _____

Employee Type

- ☐ Student
☐ Faculty
☐ Adjunct
☐ Staff part-time
☐ Staff Full time

Action to be taken

- ☐ Enroll in Direct Deposit (NEW!)
☐ Account Number Change (same financial institution)
☐ Change in Financial Institution
☐ Terminate Direct Deposit

Financial Institution Name: _____

Routing /Transit #: _____ Account Number: _____

☐ Checking ☐ Savings I wish to deposit: ☐ \$ _____ OR ☐ Entire Net Amount

Financial Institution Name: _____

Routing /Transit #: _____ Account Number: _____

☐ Checking ☐ Savings I wish to deposit: ☐ \$ _____ OR ☐ Entire Net Amount

Financial Institution Name: _____

Routing /Transit #: _____ Account Number: _____

☐ Checking ☐ Savings I wish to deposit: ☐ \$ _____ OR ☐ Entire Net Amount

- I authorize Stevens Institute of Technology to deposit/distribute my net pay to my account(s) as indicated above. If funds to which I am not entitled are deposited to my account(s), I authorize Stevens to direct my financial institution(s) to return said funds.
- I will notify the Office of Payroll immediately before closing accounts.
- I understand that in the event that my financial institution(s) is not able to deposit any electronic transfer into my account due to any action I take, Stevens cannot issue the funds to me until the funds are returned to Stevens by my financial institution(s).
- I understand this authorization will override any previous authorization and will remain in effect until terminated by my written request. I understand that I must immediately notify the Payroll Office before I close any/all accounts while this authorization is in effect.

Employee Signature: _____ Date: _____