

**PAYROLL SERVICES**

## Direct Deposit Authorization Form

**Privacy Notice:** State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information; and (3) have the information corrected at no charge.

**INSTRUCTIONS:** This form is used by employees to request direct deposit of their payroll check into a bank or credit union. It is the employee's responsibility to provide accurate routing and account number information. If in doubt, contact your financial institution to ensure accuracy prior to submitting this form. Please print clearly and legibly to prevent errors.

If your direct deposit will be to a financial institution **OUTSIDE** the United States, please also complete the [Texas A&M University OFAC Compliance Form](#) found on the Payroll Services website.

This **Direct Deposit Authorization Form** is for **payroll** payments only. For direct deposit of employee reimbursements for travel and purchases, visit the FMO web site at <http://finance.tamu.edu/fmo>.

**EMPLOYEE IDENTIFICATION**

Name		UIN	
Email		Home Phone	
Department	Work Phone	Mail Stop	

**ACTION REQUESTED**

<input type="checkbox"/> Cancel Service:	Do not complete the Financial Identification Section. Sign and Date Below.
--	--

**ACTION REQUIRED & FINANCIAL IDENTIFICATION**

<input type="checkbox"/> Initial Set-up	① Name of Bank/Credit Union	Phone
	Bank Address	
<input type="checkbox"/> Update Data	② Electronic deposit routing number ( <b>obtain from bank/credit union</b> )	
	③ Account number	<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Do NOT attach a check.  
Do NOT attach a deposit slip.

Refer to the example check →  
for assistance in completing the  
Financial Identification section.

Your Name	Check Number
Your Address	
<b>EXAMPLE</b>	
① Bank/Credit Union Name	
② Routing Number	③ Account Number <input type="checkbox"/>
:XXXXXXXXXX :	XXXXXXXXXX    <input type="checkbox"/>

**EMPLOYEE AUTHORIZATION – PLEASE READ**

I authorize Texas A&M University to deposit by electronic transfer my payroll amounts to the financial institution and account indicated above. **I acknowledge responsibility for providing complete and accurate information on this authorization form** and understand that Texas A&M may contact my financial institution to confirm accuracy of information. I also acknowledge that I will receive an electronic notification of earnings from A&M which will be an email confirming that my payroll data is available on HR Connect. Texas A&M reserves the right to *reverse* an incorrect posting; however, I fully understand that A&M **must** notify me on or before the settlement date (payday) and explain the reason for the reversal. I further understand that if changes occur in my account, i.e., switching deposit from checking to savings, closing account, changing banks, etc. **it is my responsibility to contact Payroll Services immediately.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**TAMU—SUBMIT TO:**

General Services Complex, Suite 1201  
MS 1261  
[payrollprocessing@tamu.edu](mailto:payrollprocessing@tamu.edu)  
Fax (979) 845-4134

**NEED HELP?**

[payrollprocessing@tamu.edu](mailto:payrollprocessing@tamu.edu)  
979-845-2711

**Office Use Only**

Verified	Confirmed	Entered
----------	-----------	---------