

# STEVENS

## Institute of Technology

Office of Finance  
Payroll Department  
Castle Point on Hudson  
Hoboken, NJ 07030  
(201) 216-5153 or 5095  
(201) 216-5137 fax

### Direct Deposit Form

#### How to Enroll

Complete the Authorization Agreement for Direct Deposit and **attach a voided personal check** (for deposit into a checking account) **or a letter from your financial institution which has to include your name, your account number and your ABA or Routing number** (for deposit into a savings or checking accounts) to the form and deliver to the Payroll Office. The Payroll Office is located in the Wesley J. Howe Center on the 11<sup>th</sup> Floor.

- Allow approximately 2 to 3 pay cycles for Direct Deposit to take effect; until it takes effect you will receive a paycheck that will be available in your department.
- Payroll deposits are credited to your account on the check date. A Payroll Summary Statement will be available for your review. The statement lists gross pay, all deductions, and net deposited.
- Direct Deposit is a joint responsibility between employer and employee. You should verify the posting of each pay with your bank. Failure to do so could result in overdraft charges for which you could be liable.

#### How to Change Accounts and/or Banks

Complete the Authorization Agreement for Direct Deposit, attach to the form either a voided personal check or a letter from your financial institution which includes your account number and the ABA or Routing number and deliver it to the Payroll Office.

- Changing banks may cause a temporary break of approximately 2 to 3 pay cycles in Direct Deposit. Payments will return to regular payroll checks during this time. The paycheck(s) will be available in your department(s)

#### How to Cancel

Complete the Authorization Agreement for Direct Deposit checking the box labeled "Terminate Direct Deposit" and deliver to the Payroll Office.

- Notify the Payroll Office immediately before closing bank accounts.

#### Authorization Agreement for Direct Deposit

Name (please print): \_\_\_\_\_

Department: \_\_\_\_\_

File # (six digit number that appears on your check or time report): \_\_\_\_\_

Or

Social Security Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Daytime Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Staff       Faculty       Part-Time       Student       Adjunct

