

Marywood University
Direct Deposit Authorization Form

I authorize the Human Resources Department of Marywood University to direct deposit my pay as follows:

Bank Name: _____

Account Type: ☐ Checking
 ☐ Savings

Attach voided check or provide:

Bank transit routing number _____

Account number _____

Please select from the following:

- ☐ Entire Net Pay
- ☐ Deduction from Net Pay Amount: \$ _____
- ☐ Change Deduction Amount From \$ _____ To \$ _____
- ☐ Discontinue Deduction Amount
- ☐ Discontinue Direct Deposit – Entire Net Pay
- ☐ Replace Direct Deposit Information

Effective Date: _____

I authorize Human Resources to share this information with the Fiscal Services Office, if needed, for Accounts Payable use

Signature

Date

Printed Name