



ELECTRONIC PAYMENT AUTHORIZATION FORM DIRECT DEPOSIT / VISA PAY CARD

NORTHERN MICHIGAN
UNIVERSITY

Full Name _____ NMU IN _____

Instructions: Please attach a copy of a voided check or deposit slip for each checking or savings account.

Direct Deposit to your checking or savings account(s)

Primary account where entire paycheck or balance of allocation will be deposited:

1. Bank Name/City/State: _____
Routing Transit #: _____ Account #: _____
 Checking Savings

Secondary accounts (optional):

2. Bank Name/City/State: _____
Routing Transit #: _____ Account #: _____
 Checking Savings I wish to deposit: \$ _____ or _____ %

3. Bank Name/City/State: _____
Routing Transit #: _____ Account #: _____
 Checking Savings I wish to deposit: \$ _____ or _____ %

Visa Pay Card

I have received the Visa Pay Card Important Information and Cardholder Fee Schedule and wish to authorize the opening of a Visa Pay Card.

I wish to deposit: \$ _____ or _____ % to the Visa Pay Card.

[Only fill out the following information if choosing the Visa Pay Card]

Date of Birth _____ Home Phone _____ Cell Phone (Optional) _____

Address where Visa Pay Card will be mailed (must be a physical address – no PO Boxes):

Street Address _____ Apt # _____

City _____ State _____ Zip _____

I hereby authorize Northern Michigan University to initiate credit entries (deposits) and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my Visa Pay Card or bank account indicated above. The authorization will remain in effect until canceled by me with written notification to Northern Michigan University Human Resources Department. Note: Federal Work Study student employees have the option of receiving a traditional paycheck mailed to their permanent home address.

If you plan to move the entire net pay from your bank account located in the United States or University pay card to a bank in another country, you must notify Human Resources at least three (3) weeks prior. Payment system requirements have changed the way the University must format these types of electronic payments. It will not impact your payroll.

SIGNATURE _____ **DATE** _____

Failure to return this form with the account information necessary to implement direct deposit or provide the necessary direct deposit account information through MyNMU within 30 days will be presumed to indicate consent to receiving wages through the Pay Card option.