AUTHORIZATION FOR NET PAY DEPOSIT AND WEBCHECK

The undersigned hereby authorizes Western Michigan University (WMU) to make deposits to the institution and account identified below, and authorizes that institution to accept such deposits for credit to my account. It is agreed that these deposits may be made electronically and under the Rules of the National Automated Clearing House Association. It is also agreed that WMU will provide a secure website for me to access an electronic version of my paycheck information and that I will no longer receive a paper copy of said paycheck. This authorization will remain in effect until written notice is given to the WMU Payroll Department.

Employee ID: ☐ **Faculty/Staff** ☐ **Student** **Name:** **Phone:**

Is this New ☐ **a Change** ☐ **or Cancellation** ☐ (if a cancellation, then no other information is required)

Bank or Credit Union: **Branch Location:**

Routing Transit Number: **Account Number:**

Type Of Account
Checking ☐ **Savings** ☐

Date: (mm/dd/yyyy)

_____
(Employee Authorizing Signature)

Print, Sign and Return this form to the Payroll Department – Mail Stop 5250

Rev. 05/04

Print Form Clear Form