



Central Washington University

LEARN. DO. LIVE.

Please circle one: Faculty/Staff Student Employee

Payroll Only

DIRECT DEPOSIT AUTHORIZATION

Form with fields: Last Name, First Name, M.I., CWU Identification Number, Employing Department, Your Phone Number

Write VOID on a check, ATTACH HERE! \*For a direct deposit to a Savings account, your bank must complete the routing and account numbers and sign as indicated below.

START CHANGE STOP options with checkboxes and descriptions

Type of Account - CHECK ONE: Checking Savings; \*Bank Name, Routing Number, Account Number, Phone Number, Bank Officer Signature

I UNDERSTAND THAT I MUST SUBMIT A DIRECT DEPOSIT AUTHORIZATION FORM IF I CHANGE BANKS AND/OR ACCOUNTS. Return Original To: Payroll Office... Employee's Signature, Date