

EMPLOYEE AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT OF PAYROLL AND NON-STUDENT REIMBURSEMENTS

Note: Students should use this form for payroll direct deposit only. For direct deposit of refunds/reimbursements, students should complete the online Authorization Agreement for Direct Deposit of any Non-Payroll Payments @ mysail.oakland.edu.



Last Name: First Name:
 Grizzly ID: Telephone:
 E-mail: @oakland.edu

Reason for Submission	Type
<input type="checkbox"/> New Participant	<input type="checkbox"/> Monthly
<input type="checkbox"/> Add	<input type="checkbox"/> Bi-Weekly
<input type="checkbox"/> Change	
<input type="checkbox"/> Cancel Authorization	

Check appropriate boxes.

Bank or Credit Union	Routing/ABA Number <small>(What is a Routing Number?)</small>	Account Number <small>(What is an Account Number?)</small>	Flat Dollar Amount	Percent of Pay	Payroll*		Accounts Payable**	
					Checking	Savings	Checking	Savings
Bank 1								
Bank 2								
Bank 3								

Select one.

Check the boxes for the ones that apply.

For a checking account, attach a voided check. For a savings account, attach evidence of your account number and routing number for that financial institution.

* You may choose up to three (3) accounts for Payroll direct deposit.

** You may choose only (1) account to use for direct deposit of properly authorized reimbursements processed through Accounts Payable.

By signing or submitting this Authorization Agreement, I understand, agree and certify that:

1. All of the banks or credit unions listed above are United States financial institutions and none of the direct deposit(s) made to those banks or credit unions will be electronically transferred in their entirety to a foreign financial institution in "back-to-back," "automatic sweep" or similar transactions. If this statement is not true, then:
 - I will not sign or submit this Authorization Agreement and I will receive my payroll and reimbursements by check; or
 - If I am currently enrolled in direct deposit program, I will cancel my direct deposit authorization and receive my payroll and reimbursements by check.
2. The following actions are authorized pursuant to the applicable NACHA rules:
 - Oakland University may initiate deposit (credit) entries and, if necessary, reversal/correction (debit) entries and adjustments for any deposit (credit) entries in error to my account(s) as listed above; and
 - The banks or credit unions listed above may credit and/or debit the same to such account(s).
3. The account(s) listed above belong to me and I have access to the funds in such account(s).
4. This Authorization Agreement applies to all payroll and reimbursement payments from Oakland University.
5. Oakland University may terminate this Authorization Agreement immediately, and without prior notice to me, upon:
 - Expiration of my Oakland University e-mail address;
 - Termination of my employment at Oakland University;
 - Oakland University's receipt of notice from a bank or credit union that it will no longer honor or accept direct deposits; or
 - Oakland University's decision, in its sole and exclusive discretion, to discontinue the direct deposit program or to terminate my participation in the direct deposit program.
6. Oakland University will also terminate this Authorization Agreement, following a reasonable period for administrative processing, upon:
 - Receipt of written notice from me requesting termination of the Authorization Agreement;
 - My un-enrollment from the direct deposit program through Oakland University's online system; or
 - Receipt of written notice from my personal representative, attorney-in-fact or other representative requesting termination of this Authorization Agreement following my death or legal incapacity.
7. This Authorization Agreement must be completed in its entirety.
8. I will not receive a printed payroll stub each payday; however, I will be able to retrieve a copy of my payroll stub from the Oakland University SAIL website.
9. It is my responsibility to communicate with the banks or credit unions listed above to ensure that all direct deposits have been correctly applied to my account(s).
10. I must obtain proper authorization, as prescribed by Oakland University policies and procedures, before any reimbursement(s) will be deposited into the account(s) listed above.
11. I must attach a voided check with my name and address pre-printed on it (not a starter check) or a letter from my bank that confirms that I am an account holder and verifies the account number and ABA routing number. Oakland University will not process this form, or begin direct deposits to any account on my behalf, until I submit one of these required documents.

Signature _____ Date _____