



Payroll Office
 Administration Bldg.
 1st Floor, Room 116
 Phone: 336-770-1302
 Fax: 336-734-2920

**DIRECT DEPOSIT ENROLLMENT
 AND CHANGE FORM**

<input type="checkbox"/> ENROLL me in direct deposit		<input type="checkbox"/> CHANGE my direct deposit	
<input type="checkbox"/> Monthly Payroll		<input type="checkbox"/> Bi-weekly Payroll	
Banner ID NUMBER:	FIRST NAME:	MI:	LAST NAME:
Department:	WORK E-MAIL ADDRESS:	WORK PHONE NUMBER:	
NAME OF BANK OR FINANCIAL INSTITUTION:			
<input type="checkbox"/> Deposit to my CHECKING or MONEY MARKET account <i>(my name is on this account)</i> <input type="checkbox"/> Deposit to my SAVINGS account <i>(my name is on this account)</i>			
I am ATTACHING <i>(check one and STAPLE HERE)</i>			
<p>a PHOTOCOPY of a CHECK with my preprinted name and current address</p> <p>a CHECK marked "VOID" with my preprinted name and current address</p> <p>an official BANK FORM, certified and stamped by a banking official, which provides bank routing and account number information</p>			
PLEASE NOTE:			
<p>The University of North Carolina School of the Arts (UNCSA) will transmit your payment electronically based on the information you have provided. If the payroll transmission fails because you have given your Payroll Office incorrect or outdated information, the University can only provide a replacement payment AFTER a refund from the financial institution has been received. It is important that you provide correct account and bank routing numbers, and that you notify your Payroll Office immediately if you change banks or account numbers. UNCSA has the right to retract and correct payments, as necessary. This completed form must be received in the Payroll Office no less than 15 days prior to your next pay date for the direct deposit to be effective for the next pay period.</p>			
<p><i>I acknowledge that electronic payments to the designated account must comply with the provisions of U.S. law, as well as the requirements of the Office of Foreign Assets Control (OFAC). PLEASE CHECK ONE of the following:</i></p> <p><input type="checkbox"/> <i>I affirm that, regarding electronic payments the State of North Carolina may remit to the financial institution for credit to the account that I have designated, the entire payment amount is not subject to being transferred to a foreign bank account.</i></p> <p><input type="checkbox"/> <i>I affirm that, regarding electronic payments the State of North Carolina may remit to the financial institution for credit to the account that I have designated, the entire payment amount is subject to being transferred to a foreign bank account. I understand that any electronic payments that may be remitted to me may be labeled with "IAT" as the standard entry class. I acknowledge that availability of funds credited to the account will be subject to my receiving financial institution's policies and procedures.</i></p> <p><i>I authorize the UNCSA to initiate direct deposit entries each pay period, and if necessary, adjustments for any direct deposit entries in error, to the financial institution and account identified on the attached certification document. I understand and accept the conditions of participation in the direct deposit program. This authority will remain in effect until I cancel it in writing.</i></p>			
SIGNATURE:		DATE:	