Arkansas Tech University

Payroll Direct Deposit Allocation Form

Return this completed form with a voided check or direct deposit authorization form to the Payroll Department at 404 N. El Paso Ave.

Do Not Email or Fax Form
You must show an ATU campus ID

		100.11000	- ap		
Employee Name			T#		
Phone	#		Department		
New Enrollment		ew Enrollment	Change in Current Bank and/or Account		
	Please read this section and co	ompletely fill out the required information. If yo	u are making a change, you must comple	te all account(s) informati	on in order of priority.
Banking I		istributed into different accounts even if they a	re with different banks. Your pay will be	distributed to each accou	unt according to the order you hav
Ex	cample: Priority 1 = \$10.00 to o	ne savings account, priority 2= 100.00 to a check	king account, priority 3 would be the bala	nce of your check to eithe	er checking or savings account.
	aining NET Amount" in the Dol				
	You must attach a voide	d check or direct deposit authorization for	m from your bank for each account li	sted to validate the ac	count information.
Banking Priority	Bank Name	Bank Routing Number	Account Number	C= Checking S=Savings	Dollar Amount
1.					
2.					
3.					
4.					
	•	*** The total amount of your direct depo	osit must be equal to your net salary.	***	· · · · · · · · · · · · · · · · · · ·
	Employee Signatu	ıre	Date:		
Payroll Of	fice Use				

Initials

Date