



Authorization for Payroll Direct Deposit

Enrolling in Payroll Direct Deposit ensures your paycheck will be deposited into your designated bank account and available to you at the open of business on payday (11th of each month, or if the 11th lands on a holiday or weekend, the first working day before). **Enrolling is easy!**

Complete this form and submit to the Office of Human Resources, PO Box 172520, Bozeman, MT 59717-2520 by the 20th of the month in which you would like Direct Deposit to begin, **or**

Complete on-line through "My Info" by the 24th of the month in which you would like Direct Deposit to begin (additional on-line instructions provided on the reverse of this form)

Last name: _____ **First Name:** _____ **MI:** _____

Employee Banner ID (GID) or Social Security Number: _____

Employing Department Name: _____ **Department Phone number:** _____

With Payroll Direct Deposit, I understand that my net pay will be deposited in the bank account(s) as shown below. I understand if I change bank services, I must inform the MSU Office of Human Resources about any changes. This authorization will remain in effect until changed in writing or I terminate employment with Montana State University. I further understand that my paystub will now be available at Employee Self Service/MYINFO on my campus website.

I hereby authorize MSU to distribute my pay as indicated herein.

Employee Signature: _____ **Date:** _____

Complete the following section(s) indicating a maximum of 3 accounts. Attach a voided check (for each checking, NOW, or share-draft account) and/or a deposit slip for each savings account. These documents must be securely attached to this form.

Financial institution #1: _____
(attach voided check or deposit slip)

Dollar Amount or
Percent of Pay to Deposit
 Checking Acct
 Savings Acct

Financial institution #2: _____
(attach voided check or deposit slip)

Dollar Amount or
Percent of Pay to Deposit
 Checking Acct
 Savings Acct

Financial institution #3: _____
(attach voided check or deposit slip)

Dollar Amount or
Percent of Pay to Deposit
 Checking Acct
 Savings Acct

See reverse of form for cancellation authorization

To Cancel Direct Deposit

I hereby authorize Montana State University to cancel my Payroll Direct Deposit to any/all bank accounts on the first available payroll following the date provided below.








Employee Signature: _____ Date: _____

Last name: _____ First Name: _____ MI: _____

Employee Banner ID (GID) or Social Security Number: _____

Department Name: _____ Department Phone number: _____

On-line enrollment instructions via My Info

-  Go to www.montana.edu
-  Click "My Info" (bottom of page within "Campus Tools" bar)
-  Click "Enter Secure Area"
 - Enter your User ID (Banner GID or SSN)
 - Enter your PIN and click LOGIN
-  Click "Employee Services"
-  Click "Pay Information"
-  Click "Direct Deposit Breakdown"
-  Click "Add New Direct Deposit"