

North Greenville University

Work Study Payroll Authorization Form

Please complete this form. Sign, date, and return it to the Payroll Office.

Full Name: _____

Street Address: _____

City : _____ **State:** _____ **Zip:** _____

Email: _____ **Phone Number:** _____

I choose the following selection to authorize how I will receive my NGU Work Study net earnings:

(Please check one)

I would like 100% of my net earnings direct deposited to the following bank account:

Bank Name _____

9 digit Routing number: _____ Type of Account: __Checking __Savings

Account Number: _____

By signing this agreement, I authorize North Greenville University to initiate credit entries to the account indicated above for the purpose of expense, and/or payroll. I also authorize North Greenville University to initiate, if necessary, debit entries and adjustments for any credit entries made in error.

I would like to register for a Pay Card Account and have my net earnings deposited to the Pay Card. (See Payroll Office for details.)

I would like to have the Payroll Department of NGU apply my net wages to my NGU Student Account.

I understand that the above selection will remain in effect until changed by completing and submitting a new **NGU Work Study Payroll Authorization Form** to the NGU Payroll Department.

Signature: _____ **Date:** _____