



The University of Tennessee/Payroll Office Authorization Agreement for Direct Deposit

Employee Name: \_\_\_\_\_ Employee ID # \_\_\_\_\_ Monthly:  Biweekly:   
Last First MI

Primary Account form with fields for Name of Bank or Financial Inst., City, State, Bank Routing #, Bank Acct #, and checkboxes for Checking and Savings.

Secondary Account form with fields for Name of Bank or Financial Inst., City, State, Bank Routing #, Bank Acct #, and checkboxes for Checking and Savings, plus a Fixed Dollar Amount field.

Travel Account form with fields for Name of Bank or Financial Inst., City, State, Bank Routing #, Bank Acct #, and checkboxes for Checking and Savings.

I hereby authorize The University of Tennessee to automatically deposit my net pay and travel reimbursements into my account(s) at the financial institution(s) indicated. I also authorize withdrawal transactions from my account(s), limited to the amount of original deposit, in the event of an overpayment or erroneous deposit.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date