



DIRECT DEPOSIT (BANKING INFORMATION/ENROLMENT) FORM

- New Information
 Change of Information

Name: _____

Address: _____

SIN: _____ (last three digits)

BANKING INFORMATION

Bank Name: _____

Bank Address: _____

***** PLEASE ATTACH A VOID CHEQUE/DEPOSIT SLIP *****

*If **no** void cheque, please complete the section below ensuring all fields are completed.*

Branch Number: (5 digit number)

Institution Number: (3 digit number)

Account Number: (up to 11 digits)

Sample of Cheque Information:

010	01234	020	987654321
Cheque #	Branch #	Institution #	Account #

By signing below, I hereby authorize Nipissing University to directly deposit my compensation and accounts payable cheque (expense reimbursements) into my bank account using the banking information that I have provided above. I understand that it is my responsibility to ensure that the account information I have entered is accurate.

Employee Signature: _____

Date: _____