



THIS IS A STUDENT EMPLOYEE:
Mail form to: STUDENT EMPLOYMENT Box 407810 Station B.
Deliver form to: 2309 West End Ave, Nashville TN 37203

Direct Deposit/Pay Distribution Form

You may also use C2HR to establish direct deposit.

Social Security Number (or Employee ID Number)

Last Name

First Name

M.I.

Daytime Phone Number

I would like my paycheck/direct deposit advice:

- Delivered to my department Mailed to my home Not Printed (I will 'go paperless' and view my pay information on C2HR)

Direct deposit:

- Yes, I want direct deposit (complete section below) No Cancel my existing direct deposit

Direct Deposit Options

You may direct deposit your pay in up to three accounts (checking or savings). Please check the appropriate box for the type of account and complete the information about your bank. You must allow at least one pay period for your direct deposit to become effective.

Account #1

- Checking (For all checking account direct deposit requests, a preprinted, voided check (not a "starter" check*) must be attached to this form.)
 Savings (For all savings account direct deposit requests, a savings deposit slip must be attached to this form.)

Bank Name _____

Bank Transit Number _____

Account Number _____

For Account #1, please deposit:
_____ % of my pay into this account
or
\$ _____ dollars of my pay into this account

Account #2

- Checking (For all checking account direct deposit requests, a preprinted, voided check (not a "starter" check*) must be attached to this form.)
 Savings (For all savings account direct deposit requests, a savings deposit slip must be attached to this form.)

Bank Name _____

Bank Transit Number _____

Account Number _____

For Account #2, please deposit:
_____ % of my pay into this account
or
\$ _____ dollars of my pay into this account
or
 remaining net pay into this account

Account #3

- Checking (For all checking account direct deposit requests, a preprinted, voided check (not a "starter" check*) must be attached to this form.)
 Savings (For all savings account direct deposit requests, a savings deposit slip must be attached to this form.)

Bank Name _____

Bank Transit Number _____

Account Number _____

For Account #3, please deposit:
_____ % of my pay into this account
or
\$ _____ dollars of my pay into this account
or
 remaining net pay into this account

Employee Signature _____

Date _____

In order for this form to be valid. You must attach a voided check or direct deposit slip, and sign the form.