

## **Electronic Payment Authorization Form**

Employee Name		UARK ID				
		Home or Work Phone				
signed into	ed method of enrolling in direct deposit is u the on-campus network or if working remot ion is required for processing. If using Wo	te using Global Protect VPN. I	f it is necessary to	lease make sur complete a pa	e you are per form,	
my account changes. Th	thorize the University of Arkansas to deposi s(s) indicated below. The authorization will be University of Arkansas is not responsible aplementation of the electronic payment.	remain in effect until I have g	iven the Universi	ty of Arkansas	notification of	
You must at routing nun	our pay can be disbursed to up to 10 different ttach a voided blank check or printed form her and account number. (Only if you are Percent Allocation – Write in the amount or processing the second s	from your financial institution adding a new bank or changin	for each account g an account num	listed to valida ber)	G	
indicated for	each account. If you split it into more than one			•	•	
Banking Priority	Bank Name	Account Number	C=Checking S=Savings	Dollar Allocation	Percent Allocation	
1			-			
2						
3						
4						
5						
6						
7						
	I understand I may view my pay	slips by signing into Workday	and viewing My	Pay.		
Signature:		Date:				
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