Direct Deposit Authorization

Please return completed form to the Office of Human Resources.

I hereby authorize The Southern Baptist Theological Seminary to initiate credit entries for the net amount of my earnings into the bank account(s) indicated below.

Account Type 1

☐ Checking ☐ Savings Percentage or dollar amount to be deposited to this account: _____

Account Type 2

☐ Checking ☐ Savings Percentage or dollar amount to be deposited to this account: _____

Please attach your voided check(s) here.

If using more than one account, please indicate which Account Type (1 or 2) should be applied in the remarks section of the check.

Current Address:

☐ SBTS Box _____ (Box No.) ☐ Address _____ (Current Address)

Authorization:

_____ Employee Name (Printed)

_____ Employee Signature

_____ Date