



LAKEHEAD UNIVERSITY  
**PAYROLL – MANDATORY ELECTRONIC DEPOSIT**  
**PRIVATE AND CONFIDENTIAL**

NOTE: For your protection, we will not process this form without either a sample cheque mark 'VOID' or a 'New Direct Deposit/Pre-authorized Transactions Form' from your financial institution. You should be able to request this form at any branch of your bank. Ensure that all digits of your bank, branch and account numbers are entered correctly, otherwise WE WILL BE UNABLE TO DEPOSIT YOUR PAY - or it may go into an incorrect account. Deposits will occur based on your pay schedule (found at this web link [Payroll forms and schedules.](#))

**NOTE: This form will also authorize deposits via Electronic Funds Transfer (EFT) from Lakehead University directly into your bank account. For students, deposits may include refunds due to overpayment (e.g. as the result of dropped or withdrawn courses). For employees, deposits may include reimbursement of travel or other expenses. All refunds will be deposited into the account indicated on this form. For these types of payments you will receive an email notification at the email address provided by you below or to your Lakehead University email account.**

Please print legibly:

\_\_\_\_\_  
EMPLOYEE NAME (first and last) EMPLOYEE/STUDENT ID NUMBER

NAME OF BANK: \_\_\_\_\_

ADDRESS OF BANK: \_\_\_\_\_

BRANCH OR TRANSIT CODE (must be 5 digits): \_\_\_\_\_

INSTITUTION # (must be 3 digits): \_\_\_\_\_

ACCOUNT # (must be at least 7 digits): \_\_\_\_\_

YOUR EMAIL ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
EMPLOYEE SIGNATURE DEPARTMENT DATE (year/mm/dd)

*Attach VOID cheque or financial institution 'New Direct Deposit/Pre-authorized Transaction' form here – sample forms are on next page.*



Sample VOID cheque and 'Financial Institution New Direct Deposit/Pre-authorized Transaction Form'.

001

YOUR NAME  
123 ANY STREET  
YOURTOWN, PROVINCE M4P 1V5

DATE

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

**VOID**

YOUR FINANCIAL INSTITUTION  
456 MAIN STREET  
YOURTOWN, PROVINCE L1L 1L1

MEMO \_\_\_\_\_

100 DOLLARS

⑈001⑈    ⑆12345678⑆    ⑆234567⑈  
Cheque #                      Transit #                      Institution #                      Account #

### SAMPLE

#### YOUR BANK

#### Payroll Direct Deposit Instructions

Please complete and submit this form to your employer to have your paycheque automatically deposited into your Scotiabank account.

To:

(ENTER NAME OF YOUR EMPLOYER)

Please accept these instructions to automatically deposit my paycheque into my bank account as outlined below:

##### Employee Information

EMPLOYEE NAME		TELEPHONE NO.
ADDRESS		
CITY	PROVINCE	POSTAL CODE
EMPLOYER NUMBER (IF APPLICABLE)	DEPARTMENT (IF APPLICABLE)	

##### Employee Bank Account Information

Institution	Number	Customer Account No.
Your Bank		<input type="text"/>
BRANCH ADDRESS		TRANSIT

I am advising the Company to change my payroll direct deposit as indicated above. I understand that Scotiabank is not responsible for verifying these payments to my account. I will notify the Company promptly in writing if I close or make other changes to my account.

Authorized by:

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Please forward the completed request to the appropriate department in your company. Some employers may also ask you to attach a voided cheque. You may wish to keep a copy of the completed form for your records.

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\*Required business of The Bank of Nova Scotia