UNIVERSITY OF PORTLAND DIRECT DEPOSIT EXEMPTION FORM

Banner ID	Name
	(Please print)
University. This promotes sustainabil	nat all employees and students establish a direct deposit relationship with the ility on campus; eliminates the possibility of lost checks; and enables faster, more ossibility of theft and fraud. Any domestic bank is acceptable.
Exemption Request (To be completed I	by individual requesting to be exempted from receiving payments via direct deposit)
I request that I be paid by paper ch	neck for the following reason:
\square I do not have an account at a U	nited States financial institution.
Other (please describe)	
	sit, a paper check will be generated and mailed to my designated address for isbursed earlier than the designated payment date for the pay period.
equivalent service. Should a paper ch 10 business days before a replacement	bility for the delay in receiving a paper check via the United States Postal Service or heck have to be reissued due to a lost check, the individual may have to wait up to ent check will be issued and mailed. A \$50 fee will also be assessed for any checks hal completes the necessary direct deposit information.
By signing below, I acknowledge the a	above and hereby submit my request for exemption.
Signature	Date
Instructions: Please submit this form to the follow University of Portland Attn: Office of the Controller MSC 167 5000 N. Willamette Blvd Portland, OR 97203 directdeposit@up.edu	ring address:
Office of the Controller Use Only:	
Received by:	Date: