



Human Resources Division

Bank Authority Form

HR Office use only

Personal Details

First Name		Surname	
Employee Number		Department	
Telephone		Email	

Authorisation

I hereby authorise the University of Otago to pay all salary/wages due to me into my bank account ***(please attach proof of your bank account including your name)***

Bank Account Details

Account Number

Account Name																			
Bank																			
Branch																			
Town																			
Signature													Date:						