

Focus Card™

ENROLLMENT FORM

Fill out this form and return to your Manager or the Payroll Department. If you are already enrolled in direct deposit and would like add a Focus Card to your existing electronic pay allocation, please complete this form in its entirety and forward to paycard@temple.edu.



First Name:

Last Name:

Address:

City:

State:

Zip Code:

Phone Number:

TUId Number:

Date of Birth:

Email Address:

If already enrolled in direct deposit, enter amount to be added to Focus Card each pay cycle (*% or \$ amount*):

Important Information About Procedures For Opening A New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: when you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

I hereby authorize my employer to initiate credit entries (deposits) and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my Focus Card. This authorization will remain in effect until cancelled by me with written notification to my employer

Signature:

Date:

