Office of Human Resources



Prepared By

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BANKING DETAILS FORM - CASUAL EMPLOYEES \square MR ☐ MISS \square DR _____TITLE: **EMPLOYEE NO.** \square MRS □ MS ☐ PROFESSOR FIRST NAME: _____ **SURNAME: ADDRESS: POST CODE:** DATE OF BIRTH: **HOME PHONE:** MOBILE: **BANK DETAILS** I hereby authorise you to deposit my Nett Salary as follows: Name of Bank/Credit Union etc: **Branch Location: BSB Number** (six digit number) **Account Number** (maximum 9 digits from your bank statement - NOT FROM YOUR KEYCARD) **Account Name:** All monies remitted on my behalf, pursuant to this Authority, shall be deemed to be payment to me personally. This Authority is to continue until such time as I withdraw it in writing. **Signature of Employee** Date **HUMAN RESOURCES USE ONLY:**

Date

Checked By

Date