

**PERSONAL DIRECT DEPOSIT
INFORMATION**

Internal Use Only

PERSONAL INFORMATION			
PREFIX	FIRST NAME, MIDDLE NAME	SURNAME	TITLE/POSITION
_____ - _____ - _____		_____/_____/____-	
SOCIAL INSURANCE NUMBER		DATE OF BIRTH (YYYY/MM/DD)	

CONTACT INFORMATION		
(____) _____ - _____	(____) _____ - _____	(____) _____ - _____
HOME PHONE	WORK PHONE	CELL PHONE

ADDRESS 1	ADDRESS 2
<i>Primary address will be used for all NOSM University mail correspondence (Example: tax forms)</i>	<i>Alternate address is a temporary or placement address and will not be used for NOSM University mail correspondence</i>
ADDRESS _____ CITY _____ PROVINCE POSTAL CODE COUNTRY _____	ADDRESS _____ CITY _____ PROVINCE POSTAL CODE COUNTRY _____
Please indicate Address Type: <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Short-Term/Placement	Please indicate Address Type: <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Short-Term/Placement

BANKING INFORMATION	
Please indicate account type: <input type="checkbox"/> Chequing <input type="checkbox"/> Savings	Note: Personal line of credit not accepted
To ensure the accuracy of your account information a VOID CHEQUE (or Bank Verification Form) must be attached.	
<input type="checkbox"/> I consent to have this information used by Finance for accounting purposes, if applicable.	

REMITTANCE INFORMATION
Please indicate how you would prefer to receive your payment details: (Check one and provide email if selected)
<input type="checkbox"/> E-MAIL ADDRESS: _____
<input type="checkbox"/> NO REMITTANCE ADVICE NECESSARY

SIGNATURE APPROVAL	
_____ SIGNATURE	_____ DATE

Please return completed direct deposit form to:	NOSM University – Human Resources 935 Ramsey Lake Road, HSERC, Sudbury, ON P3E 2C6 Fax: (705) 671-3880 Email: hr@nosm.ca	Revised May 2022
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Protection of Personal Information: NOSM University protects your privacy and your personal information. The personal information requested on this form is collected under the authority of the Letters Patent of the Northern Ontario School of Medicine dated November 15, 2002, and in accordance with the Freedom of Information and Protection of the Privacy Act. Personal information collected is used by the School for the purposes of executing various functions and activities related to Administration processes.