

Direct Deposit Authorization

Employee Information

Name: _____ College Phone _____

Social Security Number _____

Banking Information

Account Type	New or additional	Change Amount or Percentage	Cancel	Financial Institution	Account Number	Amount or Percentage
<input type="checkbox"/> Savings <input type="checkbox"/> Checking						
<input type="checkbox"/> Savings <input type="checkbox"/> Checking						

Financial Institution Information

This section must be completed by your financial institution for new/additional accounts when directing funds into a savings account or into a checking account if a void personal check is not attached. The employee's name MUST appear on the account(s).

As a representative of the below names financial institution, I certify that this institution is ACH capable and agree to receive and deposit the salary to the account shown above in accordance with Part 102 of the Codes, Rules, and Regulations of the State of New York and to be bound by such rules. Salary credited to the account below will be available to the depositor on payday.

NAME OF FINANCIAL INSTITUTION _____ Account Type Savings Checking

Depositor's Account Number _____ Routing Number _____

Representative's Name

Signature

Phone Number

Date

NAME OF FINANCIAL INSTITUTION _____		Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Checking	
Depositor's Account Number _____		Routing Number _____	
_____ Representative's Name	_____ Signature	_____ Phone Number	_____ Date

Employee Certification: **I certify that I read and understand the instructions on this form, including the authorization for recovery.** In signing this form, I authorize my salary payment to be sent to the designated financial institution(s) to be deposited into the specified account(s).

Employee Signature _____ Date _____

Instructions: Please complete the form and return to payroll.

Employee Information: Indicate your name, Social Security number and College phone number

Banking Information: Indicate what type of account the funds will be deposited to. Indicate if this direct deposit is new or additional, check if the amount or percent changed in the box, check if you are canceling a previous direct deposit allocation. Indicate the financial institution, account number and fixed amount or percent of your total paycheck you would like deposited into that specific account.

Financial Institution Information: This section must be completed by your financial institution if you are depositing funds into a savings account or if you are depositing funds into a checking account without providing the College with a voided check. The employee's name **MUST** appear on the account.

Any changes to this direct deposit allocation requires a new form to be completed. Changes include financial institutions, account numbers, fixed amount or percentage allocations.

Cancellations: The agreement represented by this authorization will remain in effect until canceled by the employee. To cancel the agreement, the employee **must** complete a new form indicating "Cancel" in the Banking Information section of the form.

Benefits of Direct Deposit

Timely...with direct deposit, payroll funds are deposited into your account and available at midnight of the pay date. Additionally, no time is spent in line at the bank or ATM to deposit funds, and there is no waiting time for the direct deposit to clear.

Secure...with direct deposit there is no worry associated with lost, stolen or misplaced checks, as the funds are deposited directly into your bank account. Direct deposit is the most private, safest, proven way to transfer money.

Reliable...Funds are deposited into your account on pay day regardless if you are in attendance on that pay date.

Convenient...Funds can be deposited into more than one account to meet your financial needs.