



Manhattanville COLLEGE

AUTHORIZATION FOR DIRECT DEPOSIT OF PAYROLL

Manhattanville College offers the convenience of automatically depositing your paycheck. Please complete this form and return it to Human Resources or to the Payroll Office. Your earnings statement will be available online via Web Advisor. You will continue to receive a check until your financial institution has verified all account information.

Manhattanville ID # _____ Name: _____

SSN #: _____ Department: _____

PLEASE COMPLETE

TYPE OF ACCOUNT:

CHECKING SAVINGS

Banking Institution: _____

Bank Routing # _____ Account # _____

Are you adding an additional account? Yes No

TYPE OF ACCOUNT:

CHECKING SAVINGS

Banking Institution: _____

Bank Routing # _____ Account # _____

PLEASE ATTACH A VOIDED CHECK FOR YOUR CHECKING ACCOUNT. IF YOU DO NOT HAVE A VOIDED CHECK, WE REQUIRE A DIRECT DEPOSIT ENROLLMENT FORM FROM YOUR BANK OR A LETTER SIGNED BY A BANK EMPLOYEE STATING YOUR NAME, ACCOUNT NUMBER AND ROUTING NUMBER.

I hereby authorize Manhattanville College to deposit my payroll check in the account identified above. I have verified that the bank listed will accept the automatic deposit. In the event that any monies are erroneously deposited to my account, I agree that Manhattanville College has the right to recover all monies. I am responsible for verifying all the deposits with my bank before I issue any checks against my account.

This authorization is to remain in full force and effect until the Payroll Department has received WRITTEN notification from me of its cancellation. In the event of termination of my Manhattanville College employment, I agree that my final wages may not be direct deposited, but generated on a regular payroll check.

Signature _____ Date _____

Please return this completed form to the Payroll Office or to Human Resources.