

# DIRECT DEPOSIT FORM

- I wish to start the direct deposit of my net pay.
- I wish to change to another account. (Stop current direct deposit on file.)
- I wish to **add** another account. (*Percentage or dollar amount must be designated for one.*)
- I wish to change the percentage or dollar amount to my current account(s).
- I wish to discontinue the direct deposit of my net pay.

*I hereby authorize Washtenaw Community College to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account listed below.*

*The authority is to remain in force until employer has received written notification from me of its termination in such time and manner as to afford employer and financial institution a reasonable opportunity to act on it.*



**Remember to notify payroll before you close bank accounts involving your direct deposit.**

Employee Name \_\_\_\_\_ SS or ID Number \_\_\_\_\_  
Please print

Signature \_\_\_\_\_ Date \_\_\_\_\_

Campus Phone Number \_\_\_\_\_ Home Phone Number \_\_\_\_\_

First Bank Name \_\_\_\_\_ Account Number \_\_\_\_\_ Account Type \_\_\_\_\_  
\_\_\_\_\_Checking \_\_\_\_\_Savings

Bank Routing Number \_\_\_\_\_ Percentage or Dollar Amount \_\_\_\_\_  
(If using only one account, choose 100%)

Second Bank Name (if applicable) \_\_\_\_\_  
\_\_\_\_\_Checking \_\_\_\_\_Savings

Bank Routing Number \_\_\_\_\_ Percentage or Dollar Amount \_\_\_\_\_

Third Bank Name (if applicable) \_\_\_\_\_  
\_\_\_\_\_Checking \_\_\_\_\_Savings

Bank Routing Number \_\_\_\_\_ Percentage or Dollar Amount \_\_\_\_\_

**Checking:** A **VOIDED** check must be included in order to process. Deposit slips numbers are not always the same.

**Savings:** A form verifying routing and account numbers from your bank must be included.