

AUTHORIZATION FOR DIRECT DEPOSIT

Please sign me up for Direct Deposit and deposit my entire net pay into the following bank account:

CHECKING ACCOUNT # _____

SAVINGS ACCOUNT # _____

ABA # (TRANSIT #) _____

For Partial Amounts, please specify amount: _____

AUTHORIZATION:

I authorize Manhattan College to deposit my net pay each payday directly into my account, and to initiate (if necessary) adjustments for any credit made in error to my account. This authority will remain in effect until I have given written notice to Manhattan College to terminate this service.

Employee

Signature: _____

Date: _____

Employee Information:

Name: _____

Home Address: _____

City: _____

State: _____ Zip Code: _____

Social Security #: _____

Please attach a personal check with the word "VOID" written in large letters in ink across the face of the check. Do not sign the check.

It will take two (2) pay periods before your direct deposit will go through depending upon your bank.