MUHLENBERG COLLEGE

Direct Deposit Form

Check one: ____New Payroll Deposit ____Change Deposit Information ____Revoke Authorization

EMPLOYEE NAME_____ **SSN** __ __ __ **-** __ __ **-** __ __ __ __

The College has the capability to provide direct deposit services to all banks that are members of the automated clearing house (ACH) system. Most financial institutions are members.

Benefits of direct deposit include:

- Availability of funds at 8AM on pay day
- Eliminates problems of picking up checks during vacation
- Eliminates possibility o being delayed in US Mail
- Many banks offer reduced banking charges for direct deposit customers

If you would like to have your pay deposited directly to your bank, please complete the bottom portion of this form and return it to the Controller's office.

The process requires a test period of one pay prior to activation. This will assure the accuracy of all activity through the national transfer system. In order to begin your direct deposit, you must provide the information no later than 10 days before your usual payday. Receipt of information after this time will be processed with the next subsequent payroll. **There will always be a one payroll lead time (including any changes of information.)**

If you are not sure of your account number and your bank's ACH number, please contact your bank for the information you need. Direct deposit cannot be processed without these numbers. **Do not attach a voided check or deposit slip.**
If you have any questions or concerns, please contact Rosemary Gallagher, x3153.

I hereby authorize my employer, Muhlenberg College, to initiate credit entries to my account(s) indicated below. I authorize Muhlenberg College to debit such account(s) in the event of a credit that should not have been made for an amount not to exceed the original amount of the erroneous credit.

☐ Checking Account or ☐ Savings Account	Account Number _____ Bank Transit/ACH Number ___ ___ ___ ___ ___ ___ ___ ___ ___ (Required) I wish to deposit _____Entire Net Pay or $_____

☐ Checking Account or ☐ Savings Account	Account Number _____ Bank Transit/ACH Number ___ ___ ___ ___ ___ ___ ___ ___ ___ (Required) I wish to deposit _____Entire Net Pay or $_____

This authority is to remain in full force and effect until Muhlenberg College has received written notification from me of its termination in such time and in such manner as to afford Muhlenberg College and a reasonable opportunity to act on it.

EMPLOYEE SIGNATURE_____ **DATE**_____