

AUTHORIZATION FOR DIRECT DEPOSIT
OF PAYROLL CHECK

I authorize Stonehill College and the bank indicated below to deposit my net pay automatically to my account each payday. If monies to which I am not entitled are deposited to my account, I authorize Stonehill College to direct the bank to return said funds.

This authority will remain in effect until I have cancelled it in writing.

Choose either Checking or Savings

Contact your Bank for Tqwlpi and Account Numbers
(Cannot be a debit card number)

<u>CHECKING ACCOUNT</u>			
<u>Bank Name</u>	<u>Branch Address</u>	<u>City</u>	<u>State</u>
ROUTING NUMBER:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACCOUNT NUMBER:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ATTACH A VOIDED CHECK OR COPY OF A CHECK			

OR

SAVINGS ACCOUNT			
<u>Bank Name</u>	<u>Branch Address</u>	<u>City</u>	<u>State</u>
ROUTING NUMBER:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACCOUNT NUMBER:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Student Name (please print) Local Telephone # Stonehill ID # (66.....)

Student Signature Date