

**PAYROLL AUTHORIZATION FORM**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Employee # \_\_\_\_\_

**Direct Deposit #1 (for Net Pay):**

Name of Financial Institution: \_\_\_\_\_ Net Pay: \_\_\_\_\_  
Financial Institution City: \_\_\_\_\_ State: \_\_\_\_\_  
Financial Institution's Routing Number \_\_\_\_\_  
Your Account Number: \_\_\_\_\_  
Account Type: Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

**Direct Deposit #2 (for specified amount):**

Name of Financial Institution: \_\_\_\_\_ Amount: \_\_\_\_\_  
Financial Institution City: \_\_\_\_\_ State: \_\_\_\_\_  
Financial Institution's Routing Number \_\_\_\_\_  
Your Account Number: \_\_\_\_\_  
Account Type: Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

**Direct Deposit #3 (for specified amount):**

Name of Financial Institution: \_\_\_\_\_ Amount: \_\_\_\_\_  
Financial Institution City: \_\_\_\_\_ State: \_\_\_\_\_  
Financial Institution's Routing Number \_\_\_\_\_  
Your Account Number: \_\_\_\_\_  
Account Type: Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**VOIDED CHECK OR INFORMATION FROM BANK  
WITH ACCOUNT AND ROUTING NUMBER IS REQUIRED.**

Please note: In order to insure your changes will be included on the next payroll; this form should be in the Business office by the Friday before payroll. Mortgage and other installment payments may NOT be paid through payroll deductions.

Please indicate if you would like your pay slip emailed to your school email. It cannot be emailed to a home email address.  
Your school email address is: \_\_\_\_\_