

EMPLOYEE DIRECT DEPOSIT ENROLLMENT FORM

EMPLOYEE NAME (print): _____

SOCIAL SECURITY NUMBER or 700 NUMBER: _____

Institution Name (Bank or Credit Union): _____

Bank Routing No: _____ Account No: _____

Amount \$ _____ Checking _____ or Savings _____

(For additional accounts)

Institution Name (Bank or Credit Union): _____

Bank Routing No: _____ Account No: _____

Amount \$ _____ Checking _____ or Savings _____

- Attach a VOIDED CHECK or SAVINGS ACCOUNT WITHDRAWAL SLIP
- Deposit slips are NOT accepted
- This account will remain in effect until notice of change is submitted

PAYROLL ONLY: If this form and voided check/deposit slip are received by the 15th of the month the direct deposit will occur that same month. If received after the 15th of the month a manual paycheck will be generated and mailed. Direct deposit payments are posted to our account the last working day of each month. Pay stub information is available on www.coloradomesa.edu/mavzone.

ACCOUNTS PAYABLE: If this form is received 5 days prior to the reimbursement process date the payment will be posted directly in your bank account. A manual check will be processed if direct deposit information is not available for current reimbursement and all future reimbursements will be made via direct deposit.

This account designation is to be used for the following: (Check one only)

Payroll Only _____ Accounts Payable Only _____ Both _____

Employee Signature

Date