

Check the applicable box:

- New to direct deposit program  
 Add/change/delete existing direct deposits

## HAMPSHIRE COLLEGE PAYROLL DIRECT DEPOSIT AUTHORIZATION

**Please read and sign before completing and submitting.**

I hereby authorize Hampshire College to deposit any amounts owed me by initiating credit entries to my accounts at the financial institutions (hereinafter "Bank") as indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by Hampshire College to my accounts without responsibility for the correctness of the amount.

I understand that it may take up to two pay periods to process this request. This authorization is to remain in full force and effect until Hampshire College receives written notice from me of its termination in such time and in such manner as to afford Hampshire College reasonable opportunity to act on it. If there is a break in my employment I must contact the Payroll Department in writing to reactivate my direct deposit account(s).

Employee Name: \_\_\_\_\_ Pay Frequency: \_\_\_\_\_  
(Please Print) (Biweekly or Monthly)

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

**Account Information** (Your last item must be for the remaining amount owed to you.)

Action: \_\_\_\_\_ Bank: \_\_\_\_\_  
(Add/Change/Delete) (Name, City, State)

Priority #: \_\_\_\_\_ Routing/Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_  
(e.g. 1, 2, 3) (9 digits)

Checking  Savings  I wish to deposit: \$ \_\_\_\_\_.\_\_ or  Entire Balance

Action: \_\_\_\_\_ Bank: \_\_\_\_\_  
(Add/Change/Delete) (Name, City, State)

Priority #: \_\_\_\_\_ Routing/Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_  
(e.g. 1, 2, 3) (9 digits)

Checking  Savings  I wish to deposit: \$ \_\_\_\_\_.\_\_ or  Entire Balance

Action: \_\_\_\_\_ Bank: \_\_\_\_\_  
(Add/Change/Delete) (Name, City, State)

Priority #: \_\_\_\_\_ Routing/Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_  
(e.g. 1, 2, 3) (9 digits)

Checking  Savings  I wish to deposit: \$ \_\_\_\_\_.\_\_ or  Entire Balance

**Priority Number:** Indicate which direct deposit account should receive funds first, second or third.

**Example: Priority 1 - \$300.00 to checking "A", Priority 2 - \$200.00 to savings, Priority 3 - Balance to checking "B".**

- If net pay is \$550.00, the checking "A" deposit will be \$300.00, the savings deposit will be \$200.00 and the checking "B" deposit will be \$50.00.
- If net pay is \$500.00, the checking "A" deposit will be \$300.00, the savings deposit will be \$200.00 and there will be no checking "B" deposit.
- If net pay is \$100.00, the checking "A" deposit will be \$100.00 and there will be no savings or checking "B" deposit.

Employee ID #: \_\_\_\_\_  
(For Payroll Use Only)