

Direct Deposit Form

Full Name	Date	
Employee Number		
ccount Number 1		
Name of Financial Institution		
City	State	
51.5		
Reason for Change	Type of Acco	punt
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Section	
I authorize Macomb Community College and the financial institution(s Adjusting entries to correct errors are also authorized. This authoriza	
Signature	Date

Section

Instructions for Completing the Employee Direct Deposit Authorization Form

- Enter your name, employee ID number and today's date (if system does not autofill them for you).
- Enter the complete name of the financial institution.
- Enter the city and state of the financial institution.
- Enter the reason for the change: select from the options below.
 - Select the **NEW** option for your initial direct deposit request.
 - Select the **CHANGE** option to modify your current direct deposit.
 - Select the CANCEL option to discontinue your direct deposit.
- Enter the type of account: select from the options below.
 - Select either **checking** or **savings** account.
- Enter the routing number.
- Enter your account number. Please verify both the routing number and the account number with your financial institution.
- Enter the amount to be deposited. If you want the entire net pay deposited, enter "NET".
- Sign and date the form.
- Return this form **in person** with valid identification via either:
 - South Campus Cashier's office (SG324)
 - Payroll Office located at Macomb Administrative Center (CS307)
 - Faxed or emailed forms are not accepted.

NOTE: There is a one pay period delay in implementing your request for direct deposit. The first pay period is used as a test to insure the deposit will go to the correct account.

QUESTIONS: Contact the payroll office at (586)498-4175 or (586)498-4174