



MONTEREY PENINSULA College

AUTHORIZATION FOR ENROLLMENT IN DIRECT DEPOSIT

The Monterey Peninsula College (“Employer”) authorizes its employees to elect to have their paychecks automatically deposited into their checking or savings accounts through direct deposit. If you wish to enroll, change your enrollment, or unenroll from direct deposit, please select the appropriate box below, fill in your financial information, and initial and sign this agreement.

Initial Enrollment: I wish to enroll in direct deposit. *You must attach a voided check or a document from the bank to this form.*

Change/Correction: I am enrolled in direct deposit and wish to change or correct my prior authorization. *You must attach a voided check or a document from the bank to this form.*

Unenrollment: I wish to unenroll from direct deposit. *You will be receiving live checks sent to the address we have on file*

FINANCIAL INSTITUTION: _____		
ACCOUNT TYPE (CHOOSE ONE):	CHECKING ACCOUNT	SAVINGS ACCOUNT
ROUTING #: _____	ACCOUNT #: _____	

This Authorization shall become effective with the first payroll warrant issued after this form is submitted, and shall remain in effect until you provide Employer a copy of this form indicating that you wish to unenroll, and after a reasonable processing period, or upon termination of your employment.

By signing this Authorization, you agree that Employer may not be held responsible if your bank does not receive or post your payroll warrant to your account or if your payroll warrant is not credited to your bank account on payday. You further agree to hold harmless Employer for any claim, liability, loss, injury, or damages arising out of your enrollment in direct deposit, including, but not limited to, claims arising out of the unauthorized access of personal and/or financial information or out of identity theft. It is your responsibility to submit current and accurate information and to promptly notify Employer of any changes to the information on this form, such as a change in your financial institution, account number, or email address.

Employee Initials: _____

Direct Deposit Authorization: By signing below, I acknowledge that I have read and agree to the terms above. I hereby authorize Monterey Peninsula College to deposit my entire payroll warrant (and/or corrections to previous credits) to the institution indicated above. I further authorize the institution to credit my payroll warrant to my account and to process corrections.

NAME: _____

DATE: _____

SIGNATURE: _____