



Direct Deposit Authorization for Payroll

I authorize Kentucky Wesleyan College (“the College”) to send credit entries and adjusting debit and/or credit entries for corrections to the account or accounts indicated below. I further authorize the financial institution (“the Bank”) holding the account to post all such entries. Amounts will be deposited in the order listed.

Account	Type of account (One type per account)	Routing number (Must be nine digits)	Account number	Amount of net check to deposit (One option per account)
#1	<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Entire check <input type="checkbox"/> \$ _____ .00 <input type="checkbox"/> _____ .00%
	Name of bank: _____			
#2	<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Remainder of check <input type="checkbox"/> \$ _____ .00 <input type="checkbox"/> _____ .00%
	Name of bank: _____			
#3	<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Remainder of check <input type="checkbox"/> \$ _____ .00 <input type="checkbox"/> _____ .00%
	Name of bank: _____			

This authorization is to remain in effect until the College receives a new authorization from me in such time and manner as to allow the College and the Bank a reasonable opportunity to act on it. I understand that it is my responsibility to notify the College of any changes to the information that I have supplied on this authorization.

Printed name: _____

Last four of SSN: _____

Signature: _____

Date: _____