

SWEET BRIAR COLLEGE
Direct Deposit Authorization

1. Enter Employee/Student Information (Please type or print clearly)

Employee/Student Name: _____ Sweet Briar Employee/Student ID Number: _____
(Last, First, Middle)

Phone Number (work) _____ Phone Number (home) _____ SBC Email: _____

Do not use parenthesis or dashes when entering Phone numbers

2. Enter Banking Information (Please complete fully)

Branch Name: _____

Branch Address: _____

City: _____ State _____ Zip Code _____

Action: (Check One)

Establish Direct Deposit Discontinue Direct Deposit Change Direct Deposit I have an existing active Direct Deposit with SBC - Payroll

Type of Account (Check One) Checking Net Pay Fixed Amt _____

Savings Net Pay Fixed Amt _____

PLEASE READ CAREFULLY

I understand that my employer will deposit any fixed amount noted and my net pay amount each payday directly to my account at the financial institution specified.

I agree to notify my employer immediately of any changes to my bank account(s) so that my pay may be properly distributed.

I understand it normally takes 1 pay cycle before my pay will begin direct depositing to my account.

I understand that in the event my employer notifies my financial institution that I am not entitled to the funds deposited, my bank is authorized to debit my account for the amount of the adjustment.

The information in sections 1,2 and 3 is required.

3. EMPLOYEE/STUDENT SIGNATURE: _____ DATE: _____

A voided blank check provides SBC with the correct bank routing account.

Please attach a voided blank check in this space. The check must be pre-printed with the bank's imprinted account number.

=>ATTACH HERE<=

FOR OFFICE USE ONLY

ABA# BANK ROUTING #	BANK ACCOUNT #	ACCOUNT TYPE CHECKING (C) SAVINGS (S)	PROCESSED BY/DATE	AUDITED BY/DATE	DIRECT DEPOSIT EFFECTIVE DATE