

# Community College of Rhode Island

## EMPLOYEE PAYROLL DIRECT DEPOSIT AUTHORIZATION / CANCELLATION

### FOR STUDENT EMPLOYEES ONLY

#### INSTRUCTIONS:

PLEASE TYPE OR PRINT IN INK. Forward form to the **Payroll Office**.

All information on this form must be supplied for:

- 1) a new net pay deposit authorization
- 2) a change to a different financial institution
- 3) a change in net pay deposit to a different account number at the same institution
- 4) any change in your personal status
- 5) net pay deposit cancellation

Changes for financial institutions or type of account (checking/savings) will be limited to ONCE A YEAR.

#### NOTES:

- 1) **Attach a voided check for checking accounts or bank documentation with your name, routing and account number for savings (required).**
- 2) If a bank holiday takes place on the Monday pay date, your direct deposit may take place on the Tuesday. Please consult the Student Pay schedule for dates.
- 3) Please contact the CCRI Payroll Office 825-2180 regarding any questions about Direct Deposit.

A. NAME:	D. CCRI ID NUMBER: _ _ _ _ _
B. DEPARTMENT:	E. BANK ROUTING NUMBER: _ _ _ / _ _ _ / _ _ _
C. FINANCIAL INSTITUTION:	F. EMPLOYEE'S BANK ACCOUNT NUMBER _ _ _ _ _
G. DEPOSIT/CHANGE/CANCEL NET PAY TO ACCOUNT TYPE <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
H. EMPLOYEE AUTHORIZATION/CANCELLATION: I AUTHORIZE THE FOLLOWING ACTION:  <b><u>PLEASE CHECK ONE:</u></b>  <input type="checkbox"/> NET NEW PAY DEPOSIT <input type="checkbox"/> CHANGE NET PAY DEPOSIT <input type="checkbox"/> CANCEL NET PAY DEPOSIT	
SIGNATURE: _____ DATE: _____	

**Please note: Direct deposit notices will not be mailed to you – but will be sent to your CCRI email account with instructions on how to open the document.**