Montgomery College
Montgomery County, Maryland

I hereby authorize Montgomery College to deposit my net pay automatically to the account at the financial institution listed below. I understand that I may select another bank for direct deposit at any time by submitting a new authorization form and allowing a reasonable amount of time to act on same. I am aware that it will always take two full pay cycles for the first direct deposit and that I will receive a regular pay check in the interim.

NOTE: *PLEASE ATTACH ONE OF YOUR VOIDED CHECKS WHICH CLEARLY SHOWS YOUR ACCOUNT NUMBER AND THE TRANSIT NUMBER OF YOUR BANK FOR VERIFICATION. DO NOT ATTACH A DEPOSIT TICKET*.

PART I: EMPLOYEE INFORMATION: (MANDATORY)

Employee Name: _____ **College ID#: M**_____
(required)

AUTHORIZATION FOR DIRECT DEPOSIT OF PAY

1. ACTION TO BE TAKEN **(***Check all that apply***)**

a. ☐ **Start Direct Deposit** **b.** ☐ **Change of Financial Inst.** **c.** ☐ **Change of Account Number** **d.** ☐ **Stop**

PART II: BANK INFORMATION

Please Deposit to Account #_____

_____
Financial Institution

Type of Account: (check one) ☐ **Savings** ☐ **Checking**

Bank Routing Number (ABA) #_____

TO BE COMPLETED FOR ADDITIONAL ACCOUNT(S)

BANK NAME	ROUTING #	SAVING OR CHECKING	ACCOUNT #	AMOUNT OF DEPOSIT

Employee Signature: _____ **Date:** _____