Payroll Information

As show on Social Sec PRINT Name:			Pro	nouns:	
Phone Number:					
REQUIRED- Email ***Reminder: you					
access to the intern	Illows you to send ne payroll entry. E et.			•	nail address, as well as
<u>Direct Deposit Information</u> Complete section(s) below with your banking account information.					
Name of Bank:					
Action to be taken:	□New deposit au	thorization.	□Change fr	om previous a	authorization.
Type of Account:	\Box Checking	\square Savings	\square Pay Card	Amount:	%
Account #: 9-Digit Routing #:					
*For Multiple Account					
Action to be taken:	□New deposit au	thorization.	□Change fr	om previous a	authorization.
Type of Account:	\Box Checking	□Savings	\square Pay Card	Amount:	%
Account #:		9-Dig	it Routing #:		
	ch include my signat				the account(s) identified until I modify, cancel in
Changes to your payroll information may take up to one week to be processed and take effect on your employee profile. Please call to verify that your account information is changed.					
Employee Signatu	ro:				Date:

