



Payroll Direct Deposit

Please check one

Enrollment or Change

Account #1

Bank Name _____

Bank Routing Number _____ Account Number _____

Checking Savings I wish to deposit \$ _____ or Net Amount

Account #2 (if applicable)

Bank Name _____

Bank Routing Number _____ Account Number _____

Checking Savings I wish to deposit \$ _____ or Net Amount

Account #3 (if applicable)

Bank Name _____

Bank Routing Number _____ Account Number _____

Checking Savings I wish to deposit \$ _____ or Net Amount

I authorize Grinnell College to deposit my paycheck directly into the above account(s).

Printed Name

Signature

Date

PLEASE ATTACH A VOIDED CHECK

