DIRECT DEPOSIT ENROLLMENT/CHANGE FORM

Direct Deposit is the electronic transfer of your current payroll amount from Maine Maritime Academy to the designated account(s) in the bank(s) or credit union(s) of your choice.

Complete the required information below to enroll in or change your current direct deposit at Maine Maritime Academy. Insert the dollar (\$) or percent (%) amount to be deposited into the first (primary) account. The remainder of net earnings will automatically be deposited into the secondary account.

DO NOT CLOSE YOUR ACCOUNT UNTIL YOU HAVE RECEIVED FINAL PAY.

The following documents MUST be attached to this form:

Copy of voided check or savings deposit form for accounts into which payroll amounts are to be deposited.

I. Employee Information			
Last Name	<u>N</u>	MMA ID	
First Name	Middle Name		
1 0	Form for the first time: \Box yes \Box no	Telephone:	
This is a change to my allocation: yes no Telephone:			
Primary Account: Type of Account ☐ Checking ☐ Savings		uting Number count # All of Net Pay or	
Secondary Account: (If you did not deposit your entire payroll amount into the account specified above, the remainder will be deposited into this account.) Type of Account Bank/Credit Union Name Routing Number Checking Account #			
□ Savings			

Note: If you wish to have your pay deposited into more than two accounts, please add any additional account(s) below:

Tertiary Account: (If you did not deposit your entire payroll amount into the account(s) specified above, the remainder will be deposited into this account.)		
Type of Account	Bank/Credit Union Name	Routing Number
□ Checking		Account #
□ Savings		

III. Authorization

I authorize Maine Maritime Academy to deposit any payroll amounts owed to me to my account(s) at the depository institution(s) listed above. I authorize Maine Maritime Academy to debit my account only for the purpose of correcting an amount erroneously credited to my account. I understand it is my responsibility to verify that payments issued by Maine Maritime Academy have been credited to my account(s) before attempting to draw on the funds. I understand that this authorization will remain in effect until I change my account number(s) and notify Maine Maritime Academy in writing by completing a Direct Deposit Enrollment/Change Form. I authorize and request my Bank to accept any credit and adjusting entries initiated by MMA to my authorized account, and to credit to such account without fiscal responsibility to MMA. It is my responsibility to notify MMA if there are any changes to my depository information. I certify that I have read and understood this authorization.

Signature:

Date:

Note: Direct Deposit may not become effective for at least one paycheck after this change is processed.

Office Use Only. Received date:	
Date added to HRIS:	_ By:
First Deposit Date:	