



Payroll Direct Deposit Authorization Form

This is a fillable form, please type online. Manually sign after printing.

Instructions:

1. Fill in all information, recording the transit routing number, account number and whether deposit to a checking or savings account is being requested. Only one account can be selected for deposit.
2. Attach a voided personal check. Note: Direct Deposit is required for all monthly employees.
3. Sign and return this form to Lynne Casalino, Payroll Coordinator. The Payroll Office is located in Snyder House. Lynne can be reached with questions at casalinolj@wofford.edu or (864) 597-4221.

Important Reminders:

1. Payroll deposits are credited to your account on the date that the salary payments are due unless otherwise designated.
2. Monthly employees will receive a direct deposit advice via their Wofford email address ONLY. We cannot email or forward to other addresses. Biweekly employees will receive advice via campus mail.
3. I must notify the Payroll Office immediately if my bank information changes. If this information cannot be updated prior to the next pay period, a check will be issued until such information has been updated.

Wofford ID # SSN

First Middle Last

Home Address:

City: State: Zip Code

Wofford Email Address

Account Information

Bank Name:

Routing/Transit/ABA Number

Account Type:

Checking Savings

Account Number

Status:

Monthly Employee

Biweekly Employee

Student

After completing the information above, please print this form. Sign and date manually.

Employee Signature Date

I hereby authorize Wofford College to deposit 100% of my net pay to my account as listed above. I have attached a voided check below to verify accuracy.

