DIRECT DEPOSIT PROCEDURE

For participation in the Direct Deposit program for payroll, please complete the Direct Deposit form as follows:

- Complete item numbers 1 & 2
- Indicate the bank branch name and address in numbers 3 and 4.
- Indicate whether you would like your check deposited into either your checking or savings account. You may split your pay between checking and savings accounts.
- Complete the account number (#6) which appears on the bottom of your check, or in the case of savings, on your account statement.
- Indicate the transit or ABA routing number which is located on the bottom of your check. For the savings account, call your bank for the information.
- Date and sign the form and submit it to the Payroll Office.
- Attach a voided check for checking account deposit or a deposit form for savings account deposits.
- Please supply an email address for your pay statements if you don’t have an active PCTI email account.
- **The direct deposit will take effect in two pay periods.** This allows for time to pre-notify the bank that a direct deposit will be forthcoming for your account.

The direct deposit program works as follows:

- You do not have to have an account at Columbia Bank in order to have your check directly deposited.
- Your check is deposited so that you have access to it by 6:00 a.m. the morning of pay day. The full amount is liquid the morning of pay day.
- You will receive an email or check stub on pay day to indicate your deductions, your gross salary and your net salary deposited. This is your record.
- The direct deposit will reflect on your monthly bank statement as an automatic deposit.

If you have any additional questions, please feel free to contact the Payroll Department.
DIRECT DEPOSIT

NAME________________________

LAST 4 DIGITS OF SOC. SECURITY #________________________

BANK/BRANCH NAME________________________

ADDRESS________________________

*CHECKING________________________ **SAVINGS________________________

ACCOUNT #_________ ___________ ___________ ___________ ___________ ___________ ___________ ___________

BANK TRANSIT/ABA NUMBER # (9 digits) ___________ ___________ ___________ ___________ ___________ ___________ ___________

I hereby authorize Passaic County Technical Institute to initiate by electronic means direct deposit of my net earnings to my account into the depository bank named above. I authorize my depository bank to accept and to credit and/or debit the amount of such net earnings to my account. This authority shall remain in full force and effect until the district receives written notification from me its termination in such time and manner as to afford the district and depository bank a reasonable opportunity to act on it and in no event shall a termination notice be effective with respect to deposits processed by the district on the depository bank prior to its respect.

__________________________ ________________________
Date Employee Signature

EMPLOYEE EMAIL ADDRESS:__________________________________

__________________________ ________________________
Date Approved Signature

Return to PAYROLL Office.

*Attach a voided blank personal check

**Attach a blank deposit slip