

**DIOCESE OF SCRANTON  
PAYROLL DIRECT DEPOSIT FORM**

EMPLOYEE NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

**Please select one of the options below:**

ENTIRE CHECK (NET CHECK) \_\_\_\_\_

FIXED PERCENTAGE \_\_\_\_\_

FIXED AMOUNT \_\_\_\_\_

(Additional forms are needed for more than one bank account)

NAME OF BANK/CREDIT UNION \_\_\_\_\_

Bank ABA or Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

For deposit into checking account, **you must attach a void check.** (DEPOSIT SLIP IS UNACCEPTABLE)

**SELECT ONE:**

CHECKING \_\_\_\_\_

SAVINGS \_\_\_\_\_

It is the employee's responsibility to provide the correct banking information for direct deposit. Please verify that your account information is correct and/or that your bank or credit union is set up to receive direct deposits. It is also the employee's responsibility to verify actual payment is received by the bank/credit union on payday. If deposit is not received, please notify the Human Resource Office immediately.

EMPLOYEE SIGNATURE: \_\_\_\_\_

EMPLOYEE PHONE NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_