STUDENT EMPLOYEE DIRECT DEPOSIT AUTHORIZATION

Employee Name:	**Date:**
Permanent Address:	**City / State / Zip:**
Birth Date:	**Social Security Number:**
Phone:	**Email:**

CHOOSE YOUR DIRECT DEPOSIT METHOD BELOW:
OPTION 1: **DEBIT CARD**
OPTION 2: **CHECKING/SAVINGS ACCOUNT**

☐ **OPTION 1: Debit Card (the rapid! PayCard)**

Financial Institution Name: MetaBank®	**DEDUCTION AMOUNT / NET PAY**
Routing Number: **124085244** Direct Deposit Account Number: **353** ___ ___ ___ ___ ___ ___ ___ ___ ___ ___ *(Card ID on front of envelope)* *The account number will be assigned and entered by BARNARD COLLEGE*	☐ $ _____ or ☐ Entire Net Pay

The rapid! PayCard® Mastercard is issued by MetaBank®, Member FDIC, pursuant to license by Mastercard International Incorporated. Prepaid card can be used wherever Debit Mastercard is accepted. Mastercard is a registered trademark of Mastercard International Incorporated.

Important Information for opening a Card account: To help the federal government fight the funding of terrorism and money laundering activities, the USA PATRIOT Act requires all financial institutions and their third parties to obtain, verify, and record information that identifies each person who opens a Card account. What this means for you: When you open a Card account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

☐ **OPTION 2: Direct Deposit to Your Checking or Savings Account**

BANK / CREDIT UNION	BANK ABA#	ACCOUNT#	DEDUCTION AMOUNT / NET PAY	TYPE OF ACCOUNT
	#	#	☐ $ _____ ☐ NET 100%	☐ Savings ☐ Checking
	#	#	☐ $ _____ ☐ NET 100%	☐ Savings ☐ Checking

**Please provide either a paper check with the word "VOID" written across it
or a direct deposit form from your bank for each checking or savings account listed above.**

I authorize BARNARD COLLEGE to withhold the indicated amount(s), if available, from my pay, and deposit directly into the account(s) shown and/or I hereby authorize BARNARD COLLEGE to assign a rapid! PayCard and initiate credit entries and any correcting entries to my assigned rapid! PayCard account. The direct deposit(s) will be made on each payday, unless I notify BARNARD COLLEGE in writing of my intent to cancel. Upon BARNARD COLLEGE's receipt of a request to cancel a direct deposit authorization, it shall become effective after a reasonable opportunity to act upon it.

In the event funds are deposited erroneously into my account, I authorize BARNARD COLLEGE to debit my account(s) not to exceed the original amount of the credit, in accordance with applicable law.

I understand that BARNARD COLLEGE reserves the right to refuse any direct deposit request. I also understand that all direct deposits are made through the Automated Clearing House (ACH), and that funds availability is subject to the terms and limitations of the ACH as well as my financial institution.

If I elect the rapid! PayCard option above, I authorize Barnard College to transmit my personal information that I have provided on this form to rapid! PayCard.

Note: If sending this form electronically, please type your initials and the last 4 digits of your social security number in the signature field. If sending or faxing a paper copy, please print out and sign your name(s) in the signature box.

Employee Signature: _____   Date: _____