



**EMORY & HENRY COLLEGE  
STUDENT PAYROLL  
DIRECT DEPOSIT AUTHORIZATION**

NAME (Printed): \_\_\_\_\_

STUDENT I. D. NUMBER: \_\_\_\_\_

NAME OF BANK: \_\_\_\_\_

I request that Emory & Henry College begin direct depositing my student payroll check into the above stated bank. **PLEASE ATTACH A VOIDED CHECK TO THIS FORM FOR ACCOUNT NUMBER VERIFICATION.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date