AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT OF PAYROLL

I HEREBY AUTHORIZE COLUMBUS COLLEGE OF ART & DESIGN TO CREDIT MY BANK ACCOUNT(S) LISTED BELOW AND TO AUTHORIZE THE BANK TO CREDIT THE SAME TO MY ACCOUNT(S).

THIS AUTHORITY IS TO REMAIN IN EFFECT UNTIL REVOKED BY ME IN WRITING OR BY MY TERMINATION OF MY EMPLOYMENT WITH COLUMBUS COLLEGE OF ART & DESIGN.

BANK NAME	TRANSIT/ABA #	ACCOUNT #	AMOUNT	ACCOUNT TYPE

EMPLOYEE SIGNATURE DATE

PRINT EMPLOYEE NAME

PLEASE RETURN THIS FORM ALONG WITH A VOIDED CHECK TO THE HUMAN RESOURCES DEPARTMENT OR BY MAILING IT TO:

CCAD
ATTN: HR DEPT
107 NORTH NINTH STREET
COLUMBUS OHIO 43215

ATTACH CHECK HERE