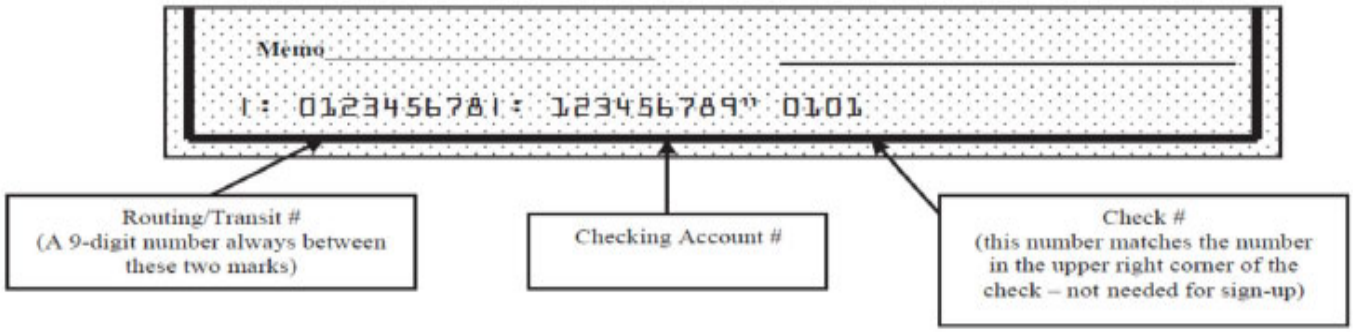
EL CAMINO COMMUNITY COLLEGE DISTRICT
16007 Crenshaw Boulevard, Torrance, California 90506-0001
Telephone (310) 532-3670 or 1-866-ELCAMINO
www.elcamino.edu

PAYROLL UNIT
HCM DIRECT DEPOSIT AUTHORIZATION

To enroll in DIRECT DEPOSIT, simply fill out this form and give it to your district payroll department. Attach a voided check for your checking account - NOT A DEPOSIT SLIP. If depositing to a savings account ask your bank to give you the Routing/Transit Number for your account. It isn't always the same as the number on a deposit slip. This will help to ensure you are paid correctly.



EMPLOYEE INFORMATION

Last Name, First Name, Middle Initial	**Employee HCM ID # (10 digit payroll #)**
Name of School District	**Phone or Extension Number**
El Camino Community College District	

ENROLLMENT OR CHANGE AUTHORIZATION

(Complete this section for new enrollment, financial institution or account changes)

PRIMARY ACCOUNT: (This is the account where 100% of your paycheck is deposited)

SELECT ONE: ☐ New Enrollment ☐ Bank/Account Change ☐ Cancel Direct Deposit

ACCOUNT TYPE: ☐ Checking ☐ Savings

Bank or Credit Union Name	**City**	**State**	**Routing Number**	**Account Number**

Please attach a voided check or bank document with the details of this account

I hereby authorize the district and the Los Angeles County Office of Education (LACOE) and/or its agent to initiate electronic deposits and, if necessary, debit corrections to previous deposits to my account.

I understand:

- -Direct Deposit status is not activated until the pre-note process is complete and I will receive a live warrant (check) for 1 - 2 payroll cycles.
- -I must submit a new ECC HCM DIRECT DEPOSIT AUTHORIZATION form if I change my account.
- -Direct Deposit status may be suspended or rescinded by the district or LACOE and payment made by county warrant, if necessary, to meet payroll deadlines or under extreme conditions.

I agree to hold harmless and indemnify the district and LACOE and its officers, employees, and agents from any claim or demand of whatever nature, including those based upon negligence of LACOE and its officers, employees, and agents for failure or delay in making deposits and/or corrections to deposits as herein authorized.

EMPLOYEE SIGNATURE **DATE**