

AGREEMENT

I, _____, hereby authorize North Carolina Wesleyan College, Inc. to use my bank checking account number for the purpose of effecting direct deposit, via electronic fund transfer, of my payroll checks into my checking account.

Signature

Social Security Number

Bank Name

Account Type: _____ Checking _____ Savings

Bank Routing Number

Account Number

Date

(Attach voided check to this form)

****Pay statements are provided electronically and may be viewed or printed by logging into MyNCWC and selecting EXI Access**