



ASSOCIATION OF EARLY  
CHILDHOOD EDUCATORS NL  
BUILDING THE FOUNDATION

## Payroll Direct Deposit

### SECTION 1: Applicate Information

**Applicant's full name:** \_\_\_\_\_

**Social Insurance Number:** \_\_\_\_\_ **CCS Certification #:** \_\_\_\_\_

To ensure timely payment, I understand that it is my responsibility to immediately update my banking information if it changes with Association of Early Childhood Educators NL (AECENL).

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

**Where possible a void cheque or bank pre-authorization form should be attached. If not please have section 2 completed by your financial institution.**

### SECTION 2: Banking Information (to be completed if void cheque or pre-authorization form not attached)

**Name of Financial Institution:** \_\_\_\_\_

**Branch Location:** \_\_\_\_\_

**Branch Contact Phone Number:** \_\_\_\_\_

**Transit #:**

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**Institution #:**

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**Account #:**

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\_\_\_\_\_  
Bank Official's Signature

\_\_\_\_\_  
Date

### Internal Use Only:

Actioned By: \_\_\_\_\_

Date: \_\_\_\_\_

Verified By: \_\_\_\_\_

Date: \_\_\_\_\_

Under the authority of the **Financial Administration Act**, personal information will be collected for the purpose of processing requests. Your personal information is protected by the Access to Information and Protection of Privacy Act and will not be disclosed without consent or authorization. Any questions or comments can be directed to AECENL at 709-726-3044 or [ecceursary@aecenl.ca](mailto:ecceursary@aecenl.ca).

## **Payroll Direct Deposit Form Instructions**

### **Notes:**

- In order to be placed on direct deposit or to make changes to your existing banking information the *Payroll Direct Deposit* form must be completed. A copy of the form can be found on the AECENL site [https://  
https://www.aecenl.ca/](https://www.aecenl.ca/) or by contacting AECENL. If you have any questions about the completion of this form, please contact AECENL.
  
- 1. The applicant must complete section one. The applicant's social insurance number and CCS Certification number must be noted.
- 2. Where possible a void cheque should be attached. If not available, please have section 2 completed by your financial institution or attach the bank provided pre-authorization form.
- 3. Completed forms and necessary information should be forwarded to [ecebursary@aecenl.ca](mailto:ecebursary@aecenl.ca) immediately to ensure timely payment.

### **Contact Information:**

**By Phone:** (709) 726-3044

**By Email:** [ecebursary@aecenl.ca](mailto:ecebursary@aecenl.ca)

**By Mail:** AECENL  
P.O. Box 8657, St. John's, NL  
A1B 3T1

**By Courier or by Hand:** 59 Pippy Place, Suite 2A, St. John's, NL

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