

Harford County Public Schools Employee Self Service Online Direct Deposit Instructions

It is not necessary to submit a paper Direct Deposit Authorization Form if you enter your direct deposit information into the Lawson Payroll System using Employee Self Service (ESS)

You will need your User ID# and Password

- From HCPS's Internal Home Page, click on LAWSON Employee Self Service. The direct link is <http://covs-mingle.hcps.k12.local/SitePages/infosuite.aspx>. Log into ESS.
- Click through the following path to access your direct deposit account information: *Pay>Direct Deposit*
- You may ADD, CLOSE, or CHANGE your accounts.
- Click on the action you want to perform and follow the instructions. If you need additional information, click on "Tips".

Important Notes:

- *The default or balance account is that account to which 100% of all funds not otherwise allocated will be deposited. If you enter only one account, it will be your default account.*
- An email to the Payroll Office will be generated for each action you perform. Be sure to review all your account information (percentages, amounts, default account) before clicking "Send". **It is imperative that you send this email to the Payroll Office.**

Helpful information:

- *The Bank Routing Number is the nine-digit number in the bottom left corner of your check. The number to the right of the Routing Number is your account number. To the right of your account number is the check number. DO NOT include this number as part of your account number as it will generate a data error with your bank and delay the deposit.*
- *Include all zeros in your account number, but do not enter any special characters such as dashes or spaces. For example, if your account number is 00012-345, enter 00012345.*

If you need help with your UserID and Login information call the Help Desk at 5242.

If you do not have access to Employee Self Service, complete the Direct Deposit Form below (reverse side) and send it via courier to the Payroll Office at the Central Office.

If you need assistance or have questions, please contact the Payroll Manager at 410-588-5241.

Harford County Public Schools Direct Deposit Authorization Form

You may complete this form Online using Employee Self Service. See reverse side for instructions.

Name _____ Employee I.D.# _____ Sch. or Dept. Assignment _____

I hereby authorize the HCPS Payroll Office to.....

- Start Direct Deposit- This is an initial request for direct deposit. Provide bank information below.
- Change all -Replaces the direct deposit(s) currently on file. Fill in every line of the bank information below to show how your pay should now be deposited.
- Add New Account(s) -Existing accounts will remain unchanged. List new account(s) only. Maximum number of accounts is four (5).
- Close Account(s)- Other accounts will remain unchanged. You must have one default account. Show below only the account(s) you want removed from direct deposit.

Note: For 10-month employees who wish to set money aside for summer savings, list the bank of your choice and select a distribution of 15.38%.

1.Bank Name	Routing# _____ (Nine Digits) Account# _____	<input type="checkbox"/> Checking or <input type="checkbox"/> Savings	Default or Balance Account ***
2.Bank Name	Routing# _____ (Nine Digits) Account# _____	<input type="checkbox"/> Checking or <input type="checkbox"/> Savings	Fixed Amount: \$ _____ Or Percentage _____ %
3.Bank Name	Routing# _____ (Nine Digits) Account# _____	<input type="checkbox"/> Checking or <input type="checkbox"/> Savings	Fixed Amount: \$ _____ Or Percentage _____ %
4.Bank Name	Routing# _____ (Nine Digits) Account# _____	<input type="checkbox"/> Checking or <input type="checkbox"/> Savings	Fixed Amount: \$ _____ Or Percentage _____ %
5.Bank Name	Routing# _____ (Nine Digits) Account# _____	<input type="checkbox"/> Checking or <input type="checkbox"/> Savings	Fixed Amount: \$ _____ Or Percentage _____ %

*** The default or balance account is that account to which 100% of all funds not otherwise allocated will be deposited.

I authorize Harford County Public Schools to deposit my net pay via direct deposit to my account(s) as indicated above. If funds to which I am not entitled are deposited to my account(s), I authorize HCPS to direct the financial institution(s) to return said funds.

I understand that it is my responsibility to verify that payments have been credited to my account(s) and that HCPS assumes no liability for overdrafts for any reason. I understand that in the event that my financial institution(s) is/are not able to deposit any electronic transfer into my account due to any action I take, HCPS cannot issue the funds to me until the funds are returned to HCPS by the financial institution(s).

I understand this authorization will override any previous authorization and will remain in effect until revoked by my written request or changed online using Employee Self Service (ESS). I understand that I must immediately notify the Payroll Office before I close any/all account(s) listed above while this authorization is in effect.

Employee Signature _____ Date _____ Phone# _____ - _____ - _____