## Salem School District Salem, Connecticut

## DIRECT DEPOSIT ENROLLMENT FORM

## Please read this form carefully and write clearly

If this is a new account, you must:

**Employee Signature** 

- 1. Already have the account set up at your bank.
- 2. Find out if the bank accepts direct deposits. Verify bank transit number and your account number (including dashes).
- 3. Notify the bank that you are going to set up direct deposit through Payroll. Make sure that there is not anything special that you need to do as far as your bank is concerned.

Please check the action and fill out the form below:  Cancelling account (complete Item C below). Do not close an account unless you cancel it through Payroll first.  Direct deposit already set up; changing monthly dollar amount only (complete Items C through E below).  A new account (complete Items A through E below).  A new account to replace a direct deposit already set up (complete Items A through E below).  Which account are you replacing?	
<u>—</u> А.	nk Name:
B.	nk TBA # (Routing #):
C.	nk Account #:
D.	ecking Savings S
E.	l Deposit Partial Deposit (Amount per Payroll): \$
Please return this form to Jennifer Kayser, Executive Assistant to the Superintendent, with a VOIDED check from your checking account or a deposit form from your savings account.  YOUR ACCOUNT NUMBER WILL BE PRE-NOTED FOR 10 DAYS to 2 WEEKS AFTER INPUT	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	athorize Salem School District and the bank listed above to deposit my net pay or portion thereof indicated above into my account each payday. Sunds to which I am not entitled to are deposited to my account, I authorize Salem School District direct the bank to return said funds. Inderstand that my deposit may not be credited to my account until 5:00 PM on the pay date icated on the check voucher. Inderstand that it is my responsibility to ensure that my wages are being deposited correctly into my ount each pay day.
Em <sub>j</sub>	vee Name (Print)

Date