

**SOUTH PIKE SCHOOL DISTRICT
DIRECT DEPOSIT FORM**

EMPLOYEE NAME: _____

EMPLOYEE'S LAST 4 DIGITS OF SOCIAL SECURITY # (**REQUIRED**) _____

EMPLOYEE PHONE NUMBER: _____

.....
BANK NAME: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

AMOUNT TO DEPOSIT: (please circle) Net Check **OR** Fixed amount \$ _____

ACCOUNT TYPE: (please circle) Checking **OR** Savings

.....
BANK NAME: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

AMOUNT TO DEPOSIT: (please circle) Net Check **OR** Fixed amount \$ _____

ACCOUNT TYPE: (please circle) Checking **OR** Savings

.....
*Attach a voided check or a copy of your savings account card. Deposit slips cannot be used.
Only 2 accounts can be setup per employee.*

When changes are made to your account information, YOU are responsible for notifying the District's payroll department.

EMPLOYEE SIGNATURE

DATE

TO BE COMPLETED AND RETURNED TO THE PAYROLL DEPARTMENT