



FOR DIRECT
PAY

New Hanover County Schools
Great Expectations. Every School, Every Child.

AUTHORIZATION
DEPOSIT OF NET

Instructions: Complete all items and return to the Payroll Department. The deposit information will be confirmed through the banking system before the first automatic deposit is made. Payroll must receive the completed form 10 days prior to your pay date to begin the process. Your bank must verify information; therefore direct deposit will not begin until the second pay date from the receipt of the direct deposit form. You will receive a copy of each direct deposit for your records.

PLEASE NOTIFY PAYROLL IMMEDIATELY IF YOU CLOSE OR CHANGE YOUR BANK ACCOUNT. FAILURE TO DO SO WILL RESULT IN A DELAYED PAYMENT.

social security number *first name* *last name*

bank name *bank location*

I hereby authorize New Hanover County Schools to deposit 100% of my net pay to my bank account and if necessary, to make adjustments for deposits made in error to my account listed below. This authority will remain in force and effect until the School System receives written notification from me of its termination or change and in such time and manner as to afford the School Board a reasonable opportunity to act upon it.

employee signature *date signed*

ATTACH A BLANK CHECK MARKED "VOID" OR A BANK PROVIDED FORM THAT INCLUDES YOUR ACCOUNT NUMBER AND BANK ROUTING NUMBER. DO NOT ATTACH A DEPOSIT SLIP.

FOR PAYROLL USE ONLY

Date Entered: _____

PR Clerk: _____