Barbers Hill ISD Direct Deposit Authorization Form

Name: (Last, First):				
Campus/Department:				
Please note: All direct deposit changes must be done in person. BHISD will not accept changes via school mail or email.				
Step 1 - Select One:				
\Box New Direct Deposit \Box Change Accoun	t/Bank			
Step 2 – Choose Account:				
 Primary Account (This is where your entire paycheck or the balance after a secondary account is deposited) Checking Savings Pay Card 	Secondary Account (Optional)			
	\Box Checking \Box Savings			
	Please designate amount of pay to be deposited			
	per pay period: \$			
Step 3 – Attach a voided check:				
Please note: a completed direct deposit form from				
your bank may also be used in lieu of a voided check				

I am aware that I should monitor my bank account and/or the Employee Access Center for this change may take one pay period to update. If a paper check is printed due to a prenote, the check will be sent through school mail **or** mailed if I am not present on the day of payroll.

I understand that the direct deposit is due at my bank based on BHISD's pay dates and that I am responsible for any and all bank service fees that result from paying out of my account before the direct deposit posted. Once a direct deposit has been transmitted, my bank is responsible for the availability of my funds.

Failure to notify the Payroll Department of account changes by the payroll deadline may result in a delay in receiving funds. If a paper check is issued and a new direct deposit form has been received, the check will be sent through school mail **or** mailed if I am not present on the day of payroll. If a paper check is issued and a new direct deposit form has not been received, the check must be picked up at the Administration Building and a new direct deposit agreement must be submitted.

I am further aware that I may view important payroll and benefit information through the Employee Access Center. Paper vouchers will not be printed.

This authorization will remain in effect until the next available pay date after the District has received written notification of a change from either me or my financial institution.

I hereby authorize the Barbers Hill Independent School District to initiate electronic credit entries to the checking or savings account(s).

Signature		Date	
Date entered:	Payroll Department Use Only	Initi	als: