



DUNCANVILLE  
Independent School District

## Direct Deposit Authorization

- New** Direct Deposit Primary or Secondary Account
- Change** Direct Deposit Primary or Secondary Account
- Delete** Direct Deposit Primary or Secondary Account
- Returning** Employee use Direct Deposit Primary or Secondary Account on File

By signing below, I hereby authorize Duncanville ISD to initiate credit and/or debit entries to my checking or savings bank account(s) as indicated in the DISD Employee Handbook.

### BANK ACCOUNT - PRIMARY

Bank Name: \_\_\_\_\_ **NET AMOUNT ONLY**    Checking: \_\_\_\_\_  
Savings: \_\_\_\_\_

### BANK ACCOUNT - SECONDARY (OPTIONAL)

Bank Name: \_\_\_\_\_ Amount/Percentage: \_\_\_\_\_    Checking: \_\_\_\_\_  
Savings: \_\_\_\_\_

Please attach

## VOID CHECK or BANK AUTHORIZATION FORM

for each account listed. **Hand written routing or account numbers will not be accepted.**

This direct deposit information is to remain active on my profile until DISD has received written notification from me of termination. Written notification must be date stamped received within the payroll department ten working days prior to any payday. In the event my funds are not deposited to the above account(s) and are returned by my bank to DISD's bank account, replacement funds will not be issued until funds have been credited and verified by the payroll department. I acknowledge this process could take several days to complete.

Print Name: \_\_\_\_\_ SSN/Emp ID#: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_