

**Union Public Schools**  
**Direct Deposit Authorization/Change Form**  
**Payroll Department - Only**

Name \_\_\_\_\_ Employee Number \_\_\_\_\_  
Last First MI

**#1 PRIMARY DIRECT DEPOSIT (100% of Net Balance)**

Bank Name \_\_\_\_\_  
Routing # \_\_\_\_\_ Account # \_\_\_\_\_  
\_\_\_\_ Checking Account      \_\_\_\_ Savings Account  
\_\_\_\_ Add                      \_\_\_\_ Change                      \_\_\_\_ Cancel

**#2 SECOND DIRECT DEPOSIT (Fixed Amount \$ \_\_\_\_\_ Each Payday)**

Bank Name \_\_\_\_\_  
Routing # \_\_\_\_\_ Account # \_\_\_\_\_  
\_\_\_\_ Checking Account      \_\_\_\_ Savings Account  
\_\_\_\_ Add                      \_\_\_\_ Change                      \_\_\_\_ Cancel

**#3 THIRD DIRECT DEPOSIT (Fixed Amount \$ \_\_\_\_\_ Each Payday)**

Bank Name \_\_\_\_\_  
Routing # \_\_\_\_\_ Account # \_\_\_\_\_  
\_\_\_\_ Checking Account      \_\_\_\_ Savings Account  
\_\_\_\_ Add                      \_\_\_\_ Change                      \_\_\_\_ Cancel

**Please attach a voided check(s) (deposit slips are not accepted) or an official document from your financial institution showing the financial institution's routing number and your account number in this space.**

**Please read carefully and sign below:**

I hereby authorize Union Public Schools to deposit my pay directly to my account and for the DEPOSITORY FINANCIAL INSTITUTION (bank, savings & loan, credit union) named above to make a credit entry to such account. If monies to which I am not entitled are deposited into my account, I authorize Union Public Schools to direct the financial institution to return said funds. I understand the payroll date and frequency of payment currently being utilized by my employing agency will not be affected by my decision to use Direct Deposit. I have read and understand the information provided on Direct Deposit.

This authority is to remain in full force and effect until I give the payroll office 30 calendar days' written notice using this form to cancel this Direct Deposit agreement. This information is provided by me to facilitate my personal banking needs and should be considered personal and held in confidence.

Signature \_\_\_\_\_ Date \_\_\_\_\_