



**ASHEVILLE CITY SCHOOLS  
AUTHORIZATION FOR AUTOMATIC DEPOSIT OF NET PAY**

**Instructions**

Complete all items and return to the Payroll Office. The deposit information will be confirmed through the banking system before the first automatic deposit is made. Any changes received after the 1st of the month will not take effect until the following month. Deposits must be made to authorized and insured banking institutions ONLY (NO cards or apps).

**DO NOT close your previous direct deposit account until you see your direct deposit in the new account - failure to do so can delay payment until the next scheduled pay date. Please remember to contact the payroll department immediately if you think your bank account has been compromised or closed.**

Choose one of the following:

- This is my first direct deposit request
- This is to update my current information on file with ACS payroll

<b>Last 4 digits of SSN</b>	<b>First Name</b>	<b>Last Name</b>
<b>Bank Name</b>	<b>Amount</b>	Deposit to: <i>(choose ONE only)</i> <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account
<b>Bank Name</b>	<b>Amount</b>	Deposit to: <i>(choose ONE only)</i> <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account
<b>Bank Name</b>	<b>XXXXXXXXXXXX</b> <b>Remaining Balance</b>	Deposit to: <i>(choose ONE only)</i> <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account

I authorize Asheville City Schools to deposit my net pay to the account and bank indicated and to initiate any necessary adjustment entries to my account for any transaction credited to it in error.

Employee Signature	Date
Employee Printed Name	

**Please attach ONE of the following documents to this form for each account listed above\*\*\***

- |                      |                                |
|----------------------|--------------------------------|
| Voided check         | Deposit slip                   |
| Letter from the Bank | Screenshot from online banking |

**\*\*\*The provided document MUST include the full routing transit number and the full account number\*\*\*  
For security reasons, electronic versions of this form will NOT be accepted.**