REQUIRED OF ALL NEW EMPLOYEES

AUTHORIZATION FOR " ELECTRONIC DEPOSIT"

I, _____ hereby authorize Ouachita Parish School Board to "Electronically Deposit" my funds on a date specified by OPSB to the bank of my choice. It is understood that this banking procedure is mandatory by Ouachita Parish School Board and is limited to one bank account per employee. It is also understood that it is my sole responsibility to notify OPSB of my bank account information as well as any changes made to my bank account. In the event of an error in the credit entry, the correction of which requires that a reversing (debit) entry is made, I hereby authorize the Depository Institution to initiate such a debit entry in the amount of the error to my account.

Employee Signature:_____ Date: _____

Emp. I.D.# _____ or Social Security # _____ - _____ - _____

ATTACH DOCUMENTATION (voided check or bank letter) TO VERIFY BANK INFORMATION AND COMPLETE THE FOLLOWING. PAYROLL WILL NOT PROCESS WITHOUT THIS ATTACHMENT

Bank Name: _____

Routing Number:_____

Account Number: ( ) Checking ( ) Savings_____

EMPLOYEE MUST NOTIFY PAYROLL AT LEAST "7' BUSINESS DAYS PRIOR TO PAYDAY OF ANY CHANGE IN DIRECT DEPOSIT STATUS.