DIRECT DEPOSIT INFORMATION

In the past Brookings School District has had mandatory direct deposit for full-time employees. Effective 07/01/2006, direct deposit will be mandatory for all employees including part-time, seasonal, noon duty, and substitutes of the Brookings School District. Your paycheck can be automatically deposited in your checking account, savings account, both, or multiple checking or savings accounts. You do not need to bank locally; your direct deposit can be deposited in any bank.

Ex. \$300 into checking account #1 \$100 into saving account #1 Balance into checking account #2

Direct Deposit will help you in many ways:

- ❖ It saves trips to your financial institution
- ❖ It saves time in depositing checks.
- ❖ It eliminates the possibility of lost, stolen or forged checks.
- ❖ Your money is deposited faster.
- ❖ Your money is deposited in you account while on vacation or away from the office on business or illness.
- ❖ If you have a college student, money can be deposited directly into his/her account in their college town.

How direct deposit works:

On payday, you will receive an earning statement showing your gross salary, other deductions and net pay. Your money will have been deposited in your account. The amount of your deposit will appear on your bank statement.

The authorization form, which is attached, gives the Brookings School District and your financial institution authority to deposit your paycheck into your account. Simply fill out the attached form and return it to the business office; your direct deposit will begin at the next regularly scheduled payroll. Please don't wait until the last minute

If you have any questions, call the Business Office at 696-4700

EMPLOYEE AUTHORIZATION - Please fill out and return to the Payroll Department I authorize you and the financial institution listed below to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my various accounts (listed below) each payday. This authority will remain in effect until I have canceled in writing. Date **Financial Institution** Name (Please Print) City State Signature checking account TRANSIT ROUTING NUMBER ACCOUNT NUMBER INFORMATION DOLLAR AMOUNT savings account TRANSIT ROUTING NUMBER ACCOUNT NUMBER INFORMATION **DOLLAR AMOUNT** other

PLEASE ATTACH A VOIDED CHECK(s) FOR BANK VERIFICATION.

ACCOUNT NUMBER INFORMATION

DOLLAR AMOUNT

TRANSIT ROUTING NUMBER