

Hoover City Schools
DIRECT DEPOSIT AUTHORIZATION FORM

A VOIDED CHECK MUST BE ATTACHED

**I authorize Hoover City Schools to direct deposit my payroll check into my bank account.
This authorization is continuous until notified in writing.**

PLEASE PRINT THE FOLLOWING INFORMATION:

NAME: (As shown on payroll check) _____

School or Work Location/Position: _____

Social Security Number: _____

Name of Bank: _____

Bank Account Number: _____
(Routing Number)

This is a:
 Checking _____
(Account Number)
 Saving _____
(Account Number)

Employee's Signature _____

Date: _____

Date to activate a new account: _____

NOTE: Changes to your direct deposit will result in a "real" check for the next payroll in order to process the change through the automated system. This information must be received on or before the 10th of each month to change bank information.

If you have any questions call 439-1000.