

# Circleville City School District

388 Clark Drive

Circleville, OH 43113

## DIRECT DEPOSIT AUTHORIZATION FORM

Circleville City Schools' Treasurer is hereby authorized to initiate credit entries for payment of salary to the following employee's account.

Employee's Name: \_\_\_\_\_

Name of financial institution: \_\_\_\_\_

City and State: \_\_\_\_\_

Routing number of financial institution: \_\_\_\_\_

Account number of financial institution: \_\_\_\_\_

Please check one:    Checking Account \_\_\_\_\_ Savings Account \_\_\_\_\_

**For a checking account a voided check must be attached so that the account number and routing number can be verified. For a savings account a form or letter from your bank with the account number and routing number must be attached. Savings account deposit slip not accepted.**

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**\*\* All staff members/substitutes/students must have payroll direct deposited and an e-mail address on file to receive direct deposit notice \*\***

**Email Address** \_\_\_\_\_

\*\* Please indicate the amount to be deposited into this account each payroll if this is for a direct deposit that is a separate amount that is to be deducted from your regular direct deposit.  
(Example: Savings account deposit or Credit Union deposit) \$ \_\_\_\_\_