

Southern Ohio Educational Service Center

DIRECT DEPOSIT ENROLLMENT FORM

All information on the DIRECT DEPOSIT ENROLLMENT FORM is required and is confidential. The information will be used to process payment data from Southern Ohio Educational Service Center fiscal office to the financial institution and/or its agent. Failure to provide the requested information may affect the processing of this form and may delay or prevent the receipt of payments through the Direct Deposit/Electronic Funds Transfer Program.

The agreement represented by this authorization remains in effect until the employer discontinues the direct deposit program or the employee cancels his participation. Enrollments or changes must be made in writing to the treasurer 30 days prior to the effective date. For example, to start your direct deposit for the September 15 payroll, this form must be received by the treasurer on or before August 15. This allows for a trial run on the August 30 payroll to verify all electronic information before the actual direct deposit takes place on September 15. Cancellations must be made in writing to the treasurer 15 days prior to the effective date.

It is the responsibility of the employee to obtain and submit the information necessary to process a direct deposit. Any changes made by you or your bank regarding your account must be provided to the treasurer in writing by completing a new sign-up sheet and must be received 30 days prior to the effective date.

The first payroll processed after receiving an enrollment form (new or change) will be a trial run to verify the electronic information provided. An actual check will be issued to the employee for that payroll. The second run (the second payroll) will make the actual deposit and a check receipt will be distributed to the employee.

DIRECT DEPOSIT ENROLLMENT FORM

TO BE COMPLETED BY EMPLOYEE

Form section for employee completion with fields for Name of Employee, Signature, Date, Type of Depositor Account (Checking/Savings), and Depositor Account Number.

TO BE COMPLETED BY YOUR FINANCIAL INSTITUTION

Form section for financial institution completion with fields for Name & Address of Financial Institution, Routing Number, Signature of Representative, and Date.

PLEASE READ THIS CAREFULLY