

Hoover City Schools
DIRECT DEPOSIT AUTHORIZATION FORM

A VOIDED CHECK OR LETTER FROM INSTITUTION MUST BE ATTACHED

I authorize Hoover City Schools to direct deposit my payroll check into this Bank Account or Money Card. This authorization is continuous until notified in writing.

PLEASE PRINT THE FOLLOWING INFORMATION:

NAME: (As shown on payroll checks) _____

School or Work Location/Position _____

Social Security Number: _____
(Last Four Digits)

Name of Bank:	_____
Bank Account Information:	_____
	<i>(Routing Number)</i>
This is a:	
____ Checking	_____
	<i>(Account Number)</i>
____ Saving	_____
	<i>(Account Number)</i>

Name of Money Card:	_____
Money Card Information:	_____
	<i>(Routing Number)</i>

	<i>(Account Number)</i>

Signature Certification Your Signature _____ Date _____

Sign Here → State of _____, County of _____

Please have your signature acknowledged before a Notary Public. On this _____ day of _____, 20_____, personally appeared before me, the above named individual and acknowledged under oath that the statements made are true.

Signature of Notary Public _____

Seal

My Commission Expires _____

Note: Upon employment and any changes thereafter, your first check will be issued as a paper check. The next check will be direct deposited into this account. If you have questions, call 439-1000.

Revised 07/30/2019