



# Midwest City-Del City Schools

## Direct Deposit Authorization/Change Form

Name \_\_\_\_\_ Employee# or Last 4 of SSN \_\_\_\_\_  
Last First MI

School site or location \_\_\_\_\_ Position \_\_\_\_\_

**#1 Primary Direct Deposit 100% of Net Balance** \_\_\_\_\_ **No Change to Primary**

Bank Name \_\_\_\_\_

Account# \_\_\_\_\_ Checking Savings

\_\_\_\_\_ Add \_\_\_\_\_ Change \_\_\_\_\_ Cancel

**#2 Secondary Direct Deposit (Fixed Amount \$ \_\_\_\_\_ Each Payday)** \_\_\_\_\_ **No Change to Secondary**

Bank Name \_\_\_\_\_

Account# \_\_\_\_\_ Checking Savings

\_\_\_\_\_ Add \_\_\_\_\_ Change \_\_\_\_\_ Cancel

**Please attach a voided check(s) (deposit slips are not accepted) or an official document from your financial institution showing the financial institution's routing number and your account number in this space. If more space is needed, please staple to this form.**

**Please read carefully and sign below:**

By signing below, I hereby authorize Midwest City-Del City Schools and the Financial Institution listed above to deposit my wages and make credit entry directly to the account listed. If monies to which I am not entitled are deposited to my account, I authorize Midwest City-Del City Schools to direct the Financial Institution to return said funds. This authorization will remain in effect until I file a new authorization form. I understand changes made to the direct deposit accounts on file during June, July, and August will not be effective until September payroll. I understand that the requested enrollment or change will take place on the next available payroll according to the payroll timelines in place. This authorization will remain in effect until a change form is received in the payroll office. All changes will be effective according to the timelines established by the payroll department.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Received in Payroll Office \_\_\_\_\_

Revised 09/25 J:Payroll/Direct Deposit/Direct Deposit authorization form