Keller Independent School District

The community of Keller ISD will educate our students to achieve their highest standards of performance by engaging them in exceptional opportunities.

L EMPLOYEES MUST BRING DIRECT DEPOSIT CHANGES TO THE PAYROLL DEPT. CHANGES WILL NOT BE ACCEPTED VIA EMAIL OR FAX.

Authorization Agreement for Direct Deposit

EMPLOYEE AUTHORIZATION

By your signature, you are authorizing Keller ISD to initiate credit entries and, if necessary, debit entries and adjustments for any credit entries made in error to the primary and/or secondary account(s) indicated below. This authority will remain in effect until you provide Keller ISD written notification to terminate the direct deposit. Written notification

will remain in effect until you provide Keller ISD written notification to terminate the direct deposit. Written notification of termination must be received at least 6 business days prior to the upcoming pay day.

Keller ISD takes all reasonable steps to ensure that employees receive the correct amount of pay on each paycheck. In the unlikely event that there is an error in the amount of pay, the employee should promptly contact the Payroll Department so that corrections can be made as quickly as possible. No employee is entitled to retain any pay in excess of the amount he/she has earned according the agreed upon rate of pay.

Pre-notes are processed prior to each payroll so that the employee's direct deposit addition/change may take place with the most current payroll. If the addition/change is made after pre-notes are processed, a live payroll check will be issued.

All live checks must be picked up in the Payroll Department.

Once a direct deposit has been successfully transmitted, your bank is responsible for the availability of your funds. If the account has been closed, your bank will return the funds to Keller ISD; however, the funds must be received before Payroll will issue a replacement check or direct deposit to a new account. This may take up to 7 buisnessdays.

Employee:			ID #:
	(Please print)		
Signature:			Campus:
	DIRECT DEPOS	SIT TYPE AND BANK I	INFORMATION
Select One: New Select One: Primary	Additional account(s) checking account: entire net chec	Account/Bank of Account/Bank o	у Ш
Primary Secondar	Primary CashPay debit card: entire net check will be deposited on a debit card Secondary checking account Specific amount required: \$ Specific amount required: \$		
Bank Name: Provide the info			account documentation: Bank Phone #:
City:		State:	ZIP:
	REQUIRE	MENTS FOR DIRECT I	DEPOSIT
The following d	ocument(s) must be provided by th	ne employee requesting	direct deposit
1) SUBM	TEES ARE REQUIRED TO SUBMIT: IT A VOIDED CHECK FROM THE BATTLE OF A DIRECT DEPOSIT AUTHORIZE FROM THEIR FINANCIAL INSTITUTION THE ORIGINAL DOCUMENT(S) THE PAYROLL DEPARTMENT WITTLE IDENTIFICATION.	ZAITON FORM FION. IN PERSON AT H PHOTO	Checking Account: Pre-printed voided check ONLY Deposit slips are not accepted Temporary checks are not accepted Savings Account: Membership card Bank statement CashPay Card: CashPay account application
Payroll Dept Use Only			
Bank Code:	Date entered Pre-Note Processed On		Initials: