

**WYLIE INDEPENDENT SCHOOL DISTRICT
WYLIE, TEXAS**

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT

(PLEASE PRINT)

NAME _____,
(LAST) (FIRST) (MI)

Only one account may be set up for direct deposit

ACCOUNT: _____ CHECKING (22) _____ SAVINGS (32)

BANK/DEPOSITORY NAME _____

NAME ON ACCOUNT _____

BANK ROUTING NUMBER _____

ACCOUNT NUMBER _____

(VOIDED CHECK MUST BE ATTACHED FOR CHECKING)

(SAVINGS VERIFICATION FORM FROM BANK FOR SAVINGS)

For the purpose of direct deposit of payroll checks only, I hereby authorize Wylie Independent School District and/or Inwood National Bank, and the depository named above to initiate direct deposit (credit) entries and correction (debit) entries to the depository accounts listed above. This authority is to remain in effect until employer has received written notification from me of its termination in such time and in such manner as to afford employer and the depository a reasonable opportunity to act on the termination notice. I understand that Wylie ISD will issue me a paper check for one month to make any necessary changes to my bank. I acknowledge that I will bring in my new banking information within the time allotted.

SIGNATURE: _____

SOCIAL SECURITY NUMBER: _____

DATE: _____ **CAMPUS:** _____