

COMAL INDEPENDENT SCHOOL DISTRICT

APPLICATION FOR DIRECT DEPOSIT OF PAYROLL

I hereby authorize Comal ISD and my Financial Institution named below to initiate credit entries, and if necessary debit entries and adjustments for any credit entries in error, to my checking/savings account indicated below. This authority will remain in effect until CISD has received written notification from me of its termination in such time and manner as to afford CISD and my Financial Institution a reasonable opportunity to act of it.

- NEW ENROLLMENT
- CHANGE ENROLLMENT
- CANCELLATION OF ENROLLMENT

Financial Institution Name: _____

Financial Institution Address: _____

City: _____ State _____

Transit/ABA (Routing) Number: _____

- Checking
- Savings

Account Number: _____

A voided check (no deposit tickets) must be included with this application form.

Employee Name (Please Print): _____

Social Security #: _____

Campus/Department: _____

Employee Signature: _____ Date: _____

After this form is received by payroll, the first check will be a pre-note and NOT direct deposit. Direct Deposit will usually start with the second check.