

**Detroit Public Schools Community District – Office of Payroll
Direct Deposit Authorization**

Please print or type

Today's Date: _____

File Number: _____

Name (Last, First, Middle): _____

Work Location: _____ Work Telephone #: _____ Home Telephone #: _____

Home Address: _____
Number Street City State Zip

Check the appropriate box below and fill in the required information. **You must attach a voided check to this form before a direct deposit into a checking account will be processed; starter checks are not permitted.** Direct deposit authorizations be will deducted and distributed in the pay period following your receipt of the District's pre-notification memorandum. All completed forms should be returned to the Office of Payroll, Customer Service Center – 11th Floor Fisher Building. Contact the Payroll Customer Service Center at (313) 873-4525.

SECTION A – One Account

- NEW** Change Account Information Terminate

Any United States

Financial Institution Name: _____

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Routing - ABA Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account Number

Type of Account (check ONE only): **Checking** **Savings**

OR

**MICHIGAN FIRST
CREDIT UNION**

Financial Institution Name: _____

2	7	2	0	7	8	3	6	5
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Routing - ABA Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account Number

Type of Account (check ONE only): **Checking** **Savings**

Entire Net Pay

OR

SECTION B – Two Accounts

- NEW** Change Account Information Terminate

ACCOUNT I

Any United States

Financial Institution Name: _____

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Routing - ABA Number

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Account Number

Type of Account (check ONE only): **Checking** **Savings**

PICK ONLY ONE

% of Net Pay: _____

Specific Amount: _____

ACCOUNT II

Any United States

Financial Institution Name: _____

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Routing - ABA Number

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Account Number

Type of Account (check ONE only): **Checking** **Savings**

Remaining Net Pay

Attach Voided Check

***** READ THE FOLLOWING INFORMATION CAREFULLY BEFORE YOU SIGN THIS FORM *****

I understand that this agreement will remain in effect until I have filed a new authorization, have terminated my employment with Detroit Public Schools Community District (DPSCD), or the Financial Institution has notified DPSCD of its' termination of the employee's arrangement.

I understand that if funds to which I am not entitled are deposited into my account, I authorize DPSCD to immediately direct the financial institution to return said funds.

I understand that Detroit Public Schools Community District shall not be held responsible for any loss of deposit standing in my name in any financial institution. I also understand that if I terminate my employment with DPSCD, my final payment may not be directly deposited to any financial institution. I further understand that DPSCD shall not be held responsible for any changes in rulings or regulations imposed by any financial institution.

Employee's Signature _____ Date: _____

DIRECT DEPOSIT INSTRUCTIONS:

When you sign up for the Direct Deposit Program, you may choose to have your entire net pay deposited into one or two accounts. These accounts can be at the same or different federally regulated financial institution.

If you choose to deposit your net pay into two bank accounts, you must deposit a percentage or fixed amount into your designated Account I. The remainder by default will be deposited into Account II.

SECTION A INSTRUCTIONS:

If you choose to have your entire check deposited into only one account, you should complete Section A of the Form. The entire amount must be designated to either the checking or savings account. You may request direct deposit into any federally regulated financial institution in the United States.

SECTION B INSTRUCTIONS:

If you choose to have your entire net pay deposited into two different accounts, you should complete Section B of the form.

Be sure to contact your financial institution(s) to verify the accuracy of your financial institution's routing number - ABA number(s), account number(s) and account type(s). This will ensure that there are no delays in processing and/or problems with your direct deposit.

The diagram shows a check form with the following fields and annotations:

- Payee: Jane Doe, 1234 Pine St., Detroit, MI 48201
- Amount: 5123
- Date: _____
- Pay to the Order of: _____ \$ _____ Dollars
- Bank One, Detroit, MI
- For: _____
- ABA Number Routing Number: **:311972523:** (circled with an arrow pointing to the label)
- Account Number: **0050235027** (circled with an arrow pointing to the label)
- Check Number: **5123**

NOTE: Please remember to attach a voided check to your Direct Deposit Authorization Form; starter checks are not permitted. Faxed or photo-copied Direct Deposit Authorization Forms are not accepted.

EMPLOYEE: Please return the completed form in a sealed envelope to the Office of Payroll, Customer Service Center – 11th Floor Fisher Building.