

DIRECT DEPOSIT AUTHORIZATION FORM

TEACHERS & SUBSTITUTE TEACHERS (For questions call Darinka Schiessler 306.791.7221)

EDUCATION SUPPORT PROFESSIONALS & C.U.P.E. LOCAL 1125 (For questions call Melody Conger 306.791.3532)

LAST NAME:					FIRST NAME:					
SCHOOL:					SIN:					

New Employee

Please Change My Existing Banking Instructions

****NOTIFICATION MUST BE RECEIVED BY THE PAYROLL DEPT. TWO WEEKS PRIOR TO PAYDAY****

You have the option of allocating your deposits into two different accounts.

If you wish to have your salary payments deposited to only **one account**, please complete the "Primary Bank Account" section only. Should you choose to have your salary payments deposited into **two accounts**, you have the option of designating the deposits by a percentage amount or by a dollar amount to a secondary account.

- Percentage Amount:** Please specify the percentage of the net earnings to be deposited to each account. The percentages designated to each account must total 100%. (e.g. 80% to primary account and 20% to secondary account = 100%)
- Dollar Amount:** Please specify the dollar amount of the net earnings you would like to have deposited to the secondary account. (e.g. \$150.00 per pay to the secondary account; the remainder will automatically be deposited to the primary account). Please note: Should the amount you specified for the secondary account exceed the net salary payment for one month, the deposit to the secondary account will be ignored. The total available earnings will then be deposited only to the primary account. (Using the earlier example, if the net earnings for the month is \$110.00, no deposit will be made to the secondary account. The amount of \$110.00 will be deposited to the primary account.)

Regina Catholic Schools is hereby authorized to directly deposit my salary payments to my account with the financial institution(s) designated below. This arrangement is in effect until the payroll department is notified in writing of a change.

PRIMARY BANK ACCOUNT										<input type="checkbox"/> only
Bank Institution No.					Branch / Transit No.					
0										
BANK ACCOUNT NUMBER										
Name of Bank or Financial Institution										
Branch Address					Tel. Number					
City					Postal Code					

<input type="checkbox"/>	and	SECONDARY BANK ACCOUNT									
Bank Institution No.					Branch / Transit No.						
0											
BANK ACCOUNT NUMBER											
Name of Bank or Financial Institution											
Branch Address					Tel. Number						
City					Postal Code						

BANK SPLIT _____ %

BANK SPLIT _____ % or \$ _____

Please attach "VOID" personalized cheque(s). If you have no available cheques, complete sections as per "Sample Cheque" (shown right) or have your bank branch complete the sections on this form or attach their machine printed form.

Sample Cheque			
9999	999999999999	999 9999999	999 9999999
Cheque No. (do not enter)	Branch No. (5 digits)	Institution No. (3 digits)	Bank Account No. for Direct Deposit

EMPLOYEE SIGNATURE _____

DATE _____