

**SARANAC CENTRAL SCHOOL DISTRICT
DIRECT DEPOSIT OF SALARY ENROLLMENT FORM**

TYPE OF TRANSACTION: _____NEW _____CHANGE _____CANCEL

SECTION 1: PLEASE COMPLETE IN FULL

EMPLOYEE NAME (LAST, FIRST, MIDDLE INITIAL): _____

SOCIAL SECURITY #: _____

ADDRESS: _____

PLEASE INDICATE THE TYPE OF ACCOUNT BELOW:

CHECKING: _____ SAVINGS: _____

AUTHORIZATION FOR RECOVERY IF FUNDS DEPOSITED IN ERROR

By signing this form, the employee and each joint tenant, if any, each consent to allow the Saranac Central School District, through the Financial Institution, to debit the account, upon notice to the account owners, in order to recover any salary to which the employee was not entitled, which was deposited to the account in error or by mistake. This means of recovery shall not prevent the Saranac Central School District from utilizing any other lawful means to retrieve salary payments to which the employee is not entitled.

CANCELLATION

The agreement represented by this authorization remains in effect until cancelled by the employee. To cancel, the employee must complete a new enrollment form with a "CANCEL" transaction.

The agreement represented by this authorization may be cancelled by the Financial Institution by providing the employee and the Saranac Central School District with a written notice 30 days in advance of the cancellation date. The Financial Institution cannot cancel the authorization without notification to both the employee and the Saranac Central School District.

Saranac Central School District retains the right to cancel this agreement at any time by providing written notice 30 days in advance of the cancellation date.

CHANGING RECEIVING FINANCIAL INSTITUTIONS

An employee may change Financial Institutions by completing a new enrollment form with a "CHANGE" transaction at the newly selected Institution. The new enrollment will cancel the enrollment at the previous Financial Institution.

A change in Financial Institutions will take at least two payroll periods for processing of the first Direct Deposit to the new account. The employee should maintain accounts at both Financial Institutions until the transaction is complete, i. e. until the new Financial Institution receives the employee's Direct Deposit payment. If the account at the first Financial Institution is not maintained, the employee may experience a delay in payment until the new authorization takes effect.

DEPOSITOR CERTIFICATION

I CERTIFY THAT I HAVE READ AND UNDERSTAND THIS FORM, INCLUDING THE AUTHORIZATION FOR RECOVERY, IN SIGNING THIS FORM; I AUTHORIZE MY SALARY TO BE SENT TO THE FINANCIAL INSTITUTION NAMED IN SECTION 2 TO BE DEPOSITED TO THE DESIGNATE ACCOUNT.

SIGNATURE _____

DATE _____

SECTION 2: ATTACH A VOIDED PERSONAL CHECK OR SAVINGS DEPOSIT SLIP BELOW