

MADERA UNIFIED SCHOOL DISTRICT

Human Resource Department

DIRECT DEPOSIT AUTHORIZATION (DDP) FORM

Madera Unified School District offers its employees the option of having their paycheck electronically deposited into one or two personal checking or savings account with multiple banks, which will occur on payday, which is the last working day of the month. If you are interested in this service, please complete the following information below. If you are not interested in this service, your check will be mailed to you via US postal service.

Employee Name:		Social Security#:	
PRIMARY ACCOUNT			
Bank/Credit Union:		Direct Deposit Amount: \$	
<input type="checkbox"/> Start Direct Deposit	<input type="checkbox"/> Stop Direct Deposit	<input type="checkbox"/> Changed Bank/CU	
<input type="checkbox"/> Checking Account – Attached is a blank voided check. Deposit slips are not accepted.		<input type="checkbox"/> Savings Account – Attached is a direct deposit form.	

SECONDARY ACCOUNT			
Bank/Credit Union:		Direct Deposit Amount: \$	
<input type="checkbox"/> Start Direct Deposit	<input type="checkbox"/> Stop Direct Deposit	<input type="checkbox"/> Changed Bank/CU	
<input type="checkbox"/> Checking Account – Attached is a blank voided check. Deposit slips are not accepted.		<input type="checkbox"/> Savings Account – Attached is a direct deposit form.	

Employee Authorization and Acknowledgement

I hereby authorize Madera Unified School District to process my request to have my wages electronically deposited as indicated above. I understand and agree to the following terms while participating in the Direct Deposit Program.

1. I understand that there will be a one-month waiting period and my direct deposit will reflect the second payroll check I receive.
2. In the event I change banks, credit unions, cancel/close my checking or savings account or been notified of a change through my bank or credit union that could affect my direct deposit, I will resubmit this form with my new changes and return to the payroll department immediately. I understand that failure to do so will result in the bank rejecting and re-routing my funds back to my employer. When this occurs, I understand MUSD will not be able to reissue me a paycheck until my funds are returned by the bank.
3. I understand that changes to my direct deposit will reflect the second pay cycle following my changes.
4. I agree to hold harmless my employer of any debts incurred in the event I fail to notify the payroll department in a timely manner when changes occur as outlines in #2.

Employee Signature: _____

Date: _____