

WIRT COUNTY SCHOOLS

DIRECT DEPOSIT ENROLLMENT

*Print all information as neatly and legibly as possible.
Proof social security number for accuracy.*

Name:	Social Security Number
Address:	Telephone Number
Name of Depository Bank or Credit Union	
Address of Depository Bank or Credit Union	
Type of Deposit: <input type="radio"/> Checking <input type="radio"/> Savings	
Bank Routing Number	Bank Account Number

I hereby authorize the Treasurer of the Wirt County Board of Education to make an ACH Direct Deposit on my behalf and pay that amount to the above listed Depository Bank and to initiate credit entries, and, if necessary, to initiate any debit entries to correct an erroneous credit entry to my account at the financial institution listed above for the purpose of automatically depositing funds as indicated above.

Employee Signature _____

Note: This form must be received by the payroll department ten (10) days before pay date. The first payroll after submission may be a pre-notification where your bank routing number and your account number are verified by the ACH network. **Your direct deposit would begin on the second pay after submitting this form.** You may access your pay stub information at <https://wveis.k12.wv.us/countempol>.

PLEASE ATTACH VOIDED CHECK HERE