

JEFFERSON UNION HIGH SCHOOL DISTRICT  
Administrative Offices

TO: All Regular Employees

FROM: Michelle Sherwin, Certificated Payroll and Benefits, Ext. 7967  
Mike Brust, Classified Payroll and Benefits, Ext. 7966

**RE: Direct Deposit**

Direct deposit is available to **all Jefferson Union High School District employees**. To enroll in direct deposit, submit the attached authorization form for either with:

1. Checking Account - a copy of a check with VOID written across it.
2. Savings Account – a savings deposit slip.

For security reasons, requests for direct deposit (and changes to banking information), are not processed until the information has been **pre-noted (test run)**.

- If your request for direct deposit is received early in the month, you will receive a check on the next pay date and direct deposit will begin or resume on the following month.
- If your request for direct deposit is received late in the month, you will receive a check on the next two pay dates and direct deposit will begin or resume the following month.

New employees who complete the form when hired will not be cleared for direct deposit until the form has been received and processed by the Payroll Dept. **YOUR DIRECT DEPOSIT HAS BEEN ACTIVATED WHEN YOU RECEIVE AN EFT SLIP IN LIEU OF A LIVE PAYROLL CHECK.**

IMPORTANT INFORMATION ABOUT DIRECT DEPOSIT:

- If an employee discontinues direct deposit during the school year, he/she may **not re-enroll** until the next school year.
- The employer may remove an employee from direct deposit when payment must be stopped to insure compliance with legal requirements. Examples are: expired credential, lack of current TB certification, salary garnishments, sick leave/personal leave garnishments, early terminations, etc.
- **Direct deposit can be sent to only one account at one financial institution.**

Please contact the Payroll Department if you have any questions.

# AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT SERVICES JEFFERSON UNION HIGH SCHOOL DISTRICT

I (we) hereby authorize the school district named above, hereinafter called EMPLOYER, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) Checking  Savings  account (select one) indicated below and the depository institution named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY NAME	BRANCH		
STREET	CITY	STATE	ZIP CODE
TRANSIT/ABA NUMBER (1)	ACCOUNT NUMBER (2)		

(1) 9 digit ABA number as it appears on MICR line on check

(2) As it appears on MICR line (including dashes and all zeroes) on check or savings account number

This authority is to remain in force and effect until EMPLOYER has received written notification from me (or either of us) of its termination in such time and in such manner as to afford EMPLOYER and DEPOSITORY a reasonable opportunity to act on it.

Name(s) (Please Print)	SOCIAL SECURITY NUMBER
DATE	SIGNATURE

**INSTRUCTIONS TO EMPLOYEE:**

- **Attach voided check or savings deposit slip to this agreement**
- **Read employee information on direct deposit to payroll**
- **Sign and forward to your payroll department**

**EMPLOYEE INFORMATION ON DIRECT DEPOSIT OF PAYROLL**

1. **FOR 12 MONTH EMPLOYEES THERE IS NO JUNE EARLY RELEASE FOR DIRECT DEPOSIT.** For 12 month employees, issue dates (pay dates) for direct deposit are the last working day of the month (the last day that the San Mateo County Office of Education administrative offices are open for business in the month).
2. Employees, who enroll in direct deposit and subsequently cancel, will not be eligible to reenroll for the balance of that fiscal year. **If you close your account you must immediately notify the payroll department.**
3. Employee recognizes that there could be a delay in the deposit to his/her account and that employer is responsible only for transmitting net pay to paying bank designated by County Treasurer. Employer assumes no responsibility beyond that point.
4. Employer may remove an employee from direct deposit when payment must be stopped to ensure compliance with legal requirements. Examples are: lack of valid credentials, lack of current TB certification, salary garnishments, sick leave/personal leave docks, early terminations, etc.

**I have read and agree to the foregoing:**

**Signed** \_\_\_\_\_  
**Employee**

\_\_\_\_\_  
**Date**