TOWNSHIP HIGH SCHOOL DISTRICT 211

Administration Center

UNITED STATES DEPARTMENT OF EDUCATION BLUE RIBBON SCHOOLS OF EXCELLENCE

November 17, 2020

Memo to: District employees receiving a paper paycheck

From: Payroll Department payroll@d211.org

On the reverse side of this memo, you will find a direct deposit application for your payroll check. We highly recommend direct deposit as the safest fastest way to receive your payroll funds each payday. The steps are shown below:

- 1- Complete this form with your name and either your employee ID number or the last 4 digits of your social security number. Indicate checking or savings. Sign and date the form.
- 2- Attach either a voided check or the routing number and account number provided by your bank (can be found on your online banking site or ask at your bank branch).
- 3- Return it to the Payroll Department via interoffice mail or drop-off at the Administration Center lobby. DO NOT email us your banking information, as email is not secure.
- 4- If we receive your form more than 5 business days prior to payday, we will be able to set up your direct deposit immediately. If it is received in less than 5 business days prior to payday, you will receive one more paper check, and then direct deposit will take effect on the next payday.
- 5- If you have access to the iVisions employee portal, your paystub will be visible 3 days prior to payday at: adc.d211.org, Staff page, Quick Links, Tyler Employee Portal. Use your district user name and password to log in.
- 6- For those without portal access, a paystub will be mailed to the home address on file.

If you have any questions or concerns, please feel free to contact us at <u>payroll@d211.org</u>.

Very sincerely,

Sandra Mir Imes Accounting Manager 847/755-6660

TOWNSHIP HIGH SCHOOL DISTRICT 211

AUTHORIZATION AGREEMENT FOR AUTOMATIC DIRECT DEPOSIT PAYROLL

| Employee Name: | | | |
|---|--|---|--|
| Last | First | Middle Initial | |
| District 211 Employee ID #: | Social Security | Social Security #: XXX-XX | |
| Please check ONE (1) of the follow | ving: | (last 4 digits only) | |
| I am not currently participating in the I | | | |
| ADD - Deposit m | y pay to the account number provided | d. | |
| I am currently participating in the Direct | ct Deposit Program. | | |
| | nge my financial institution and/or acc | count number. | |
| CANCEL - Stop | my participation in the Direct Deposi | it Program. | |
| | | | |
| Receiving Institution (Bank) Infor | <u>mation</u> | | |
| Type of Account: (Check only ONE) | | | |
| Checking, Money M | Market or Debit Only Account | Savings | |
| Voided check or Offici | al Verification of Bank | Official Verification of Bank Account | |
| Account MUST be atta | | MUST be attached below!! | |
| purpose of employee payment writing or until my employment | nt. This authorization will reent is terminated. | electronic credit entries for the main in effect until I cancel it in | |
| | | | |
| | | | |
| 3 7 | | | |
| X | | | |
| Sign | ature | Date | |
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| | | 4 | |
| IMPORTANT!!!! | | | |
| ATTACH VOID CHECK o | or OFFICIAL VERIFICATION (| OF BANK ACCOUNT HERE!! | |
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| For Office Use Only: | Date received: | Begin Pay Period: | |
| · · | | revised 11/17/20 | |