



Mt. Vernon Community School Corporation

Direct Deposit form

Please provide all of the following information:

1. MVCSC Employee name: _____

2. If joint account, you must list additional names on the account:

3. Name and address of the Bank/Credit union designated for direct deposit (ONLY ONE bank and ONE account number per employee).

- Bank Name: _____
- Street Address: _____
- P.O. Box: _____
- City, State, Zip: _____

Bank Routing Number: _____

Account Number Checking: _____ or Savings: _____

4. Employee Signature: _____ Date: _____

*****Please attach a **VOIDED CHECK** for the account listed above*****

***NOTE: YOU WILL RECEIVE ONE (1) CHECK BEFORE DIRECT DEPOSIT TAKES AFFECT;
THIS ALSO APPLIES TO A CHANGE OF ACCOUNT.***

FOR MVCSC OFFICE USE ONLY

Bank RTE # _____ Other _____

Set-up Completion Date: _____