

# Sweet Home School District #55

Sweet Home, OR

## Email Direct Deposit Advice Authorization Employee Information

Employee Name: \_\_\_\_\_  
(First) (Last) (M)

### Agreement

**ENROLL (I authorize the Payroll Department at Sweet Home School District to send my monthly direct deposit advice to me by email.)**

**By Enrolling I understand:**

1. I will not be receiving a printed copy of my direct deposit advice.
2. The email will arrive at my **district** email address, in advance of the actual payroll date and funds will not be available until payday.
3. If there are modifications to my pay for any reason between receipt of the email and payday, the Payroll Department will notify me by email.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Send completed forms to Cindy in the Business Office)