

**JASPER SCHOOL DISTRICT**

**P. O. Box 446  
Jasper, AR 72641**

**DIRECT DEPOSIT**

I hereby authorize all of my future paychecks to be direct deposited. This process will continue until I notify the Superintendent's Office in writing that I wish to cancel this option.

\_\_\_\_\_ YES\*                      \_\_\_\_\_ NO

\*(please circle Yes or No) YES, it is ok to email my check stub. Email it to: \_\_\_\_\_ or  
NO, I prefer it not to be emailed.

A **voided check** for the account into which your direct deposits are to be made must be attached to this form.

\_\_\_\_\_  
*Signature of Employee*

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

**Please return this form to Superintendent's Office.**