



DIRECT DEPOSIT APPLICATION

Name	Address	Social Insurance Number

I hereby authorize the Newfoundland and Labrador English School District, through Royal Bank of Canada, to make a deposits to my bank account. I will advise you of any change in this regard, and the authorization is to remain in effect until cancelled in writing.

Signature *Date*

NOTE: Please attach a void cheque or have a bank official complete and sign the section below. Please note that direct deposit is required for new employees.

NLESD can make multiple deposits of either a percentage or fixed amount provided you are depositing into the same bank and branch number as your main deposit.

Bank or Financial Institution:	
Branch Address:	

Main deposit information

Bank #											
Transit #											
Account #											

2nd deposit information

Fixed Dollar Amount	
Percentage	

Account #												
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Please have signature of Bank Official only if void cheque is not provided.

Bank Official Signature *Date*