

**WILLIAMSON COUNTY SCHOOLS**  
1320 West Main St., Suite #202, Franklin, TN 37064



**AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS/WITHDRAWALS**  
**(ACH CREDITS / ACH DEBITS)**

I hereby authorize Williamson County Schools, hereinafter called **SCHOOL SYSTEM**, to initiate credit or debit entries (through the Automated Clearing House) to my account(s) indicated below, at the bank(s) below, hereinafter called the Depository Financial Institution.

**1) Bank one is for net amount of check: *(Attach Voided Check) or (Letter from Bank)***

**DFI (Bank Name):** \_\_\_\_\_

**Routing Number:** \_\_\_\_\_  
(Number in far left corner of check)

**Account Number:** \_\_\_\_\_

**Account Type:** Check only one      ( ) Checking                      ( ) Savings

**2) Bank two is for set dollar amount only (optional): *(Attach Voided Check) or (Letter from Bank)***

**DFI (Bank Name):** \_\_\_\_\_

**Routing Number:** \_\_\_\_\_  
(Number in far left corner of check)

**Account Number:** \_\_\_\_\_

**Account Type:** Check only one      ( ) Checking                      ( ) Savings

**DOLLAR AMOUNT:** \_\_\_\_\_  
(Do not include cents)

I understand that **ALL** earned salary issued by the **SCHOOL SYSTEM** will be handled in this manner. This authorization is to remain in full force and effect until the **SCHOOL SYSTEM** has received written notification from me of its termination in such time and in such manner as to afford the **SCHOOL SYSTEM AND DFI (BANK)** a reasonable opportunity to act on it.

**\*\*PLEASE NOTE: This process may take up to two weeks before it becomes effective.\*\***

**Name:** \_\_\_\_\_ **SS#** \_\_\_\_\_ **Employee #:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

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