

**KAUKAUNA AREA SCHOOL DISTRICT
NEW EMPLOYEE MASTER SHEET**

(Return this form to Human Resources)

First Name: _____ Middle Initial: _____

Last Name: _____ Maiden Name: _____

Address: _____

City/State: _____ Zip _____

County: _____ Phone: _____ Cell: _____

Birth Date: _____ Sex: ☐ Male ☐ Female

Hire Date: _____ Ethnic Origin _____

Spouse: _____

Employee Type: *Administrator – Administrative Assistant – Coach - Custodian - Custodian Helper - Maintenance*
(Please Circle One) *Educational Assistant - Support Sub - Summer Help - Teacher - Teacher Sub -*
 Other _____

School Location: *Administration - Haen - High School - Park*
(Please Circle One) *Quinney - River View - Tanner*

I authorize Kaukauna Area School District and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to change it in such a time as to afford the financial institution a reasonable opportunity to act on it.

Direct Deposit Bank Name for Payroll: _____

Bank City/State: _____

Routing Number: _____ Bank Phone #: _____
(9 digit number far left edge of your check)

Account Number: _____ Checking **OR** Savings

I further authorize KASD to deposit the below listed amount to be deducted from my net payroll into a second checking or savings account.

Additional Deposit Bank Name: _____ Routing Number: _____

Bank City/State: _____ Bank Phone #: _____

Account Number: _____ Checking **OR** Savings Dollar Amount: \$ _____

Signature: _____ ***Date:*** _____

Required

You may obtain a copy of this agreement at any time