



Direct Bank Deposit Enrolment/Change Form

Initial Enrolment of Change?:

Initial Enrolment

Select from Drop-down

Employee Name (please print) : _____

I hereby authorize the Tlicho Government to deposit my pay directly to my account(s) as indicated below. This authorization will remain in force until all monies owing to me have been deposited following my termination of employment, or until a new form is completed by me.

Employee Signature: _____

Date (dd/mm/yy): _____

Attach a void cheque or if a void cheque is not available, have your financial institution complete the information below and affix their company stamp.

Primary Account for Deposit (all pay will be deposited to this account unless a second account is indicated).

Name of Financial Institution: _____

Address: _____

Phone: _____

TRANSIT # : _____

INSTITUTION # : _____

ACCOUNT # : _____

FINANCIAL INSTITUTION STAMP:

Attach Cheque Marked "VOID" Here

Please complete all three sections of the form and return to the Tlicho Government Human Resources Department. We will only accept void cheques OR forms completed and stamped by your financial institution.