

**APPLICATION TO DEPOSIT SALARY INTO BANK ACCOUNT**

The Head of Education  
Western Cape Education Department  
Private Bag X9114  
CAPE TOWN  
8000

**Initials and surname**

I hereby request you to deposit my salary directly into my bank account. I further undertake to inform the Western Cape Education Department in advance of any change in my bank account details and I accept that this authority may be cancelled only by me by giving 30 days' notice in writing.

**ID NUMBER (attach copy)**

**PERSAL NUMBER**

**NAME OF BANK**

**BRANCH CODE**

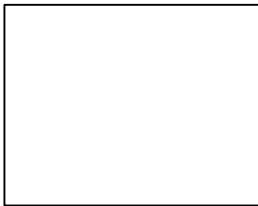
**ACCOUNT NUMBER**

Indicate with an X: Savings account  Current account   
Transmission account

\_\_\_\_\_  
**Signature of applicant**

\_\_\_\_\_  
**Rank**

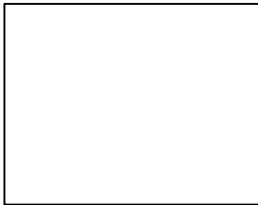
\_\_\_\_\_  
**Telephone number**



\_\_\_\_\_  
**Thumb print of applicant**

\_\_\_\_\_  
**Signature of Head of Office/Principal**

It is hereby confirmed that the above account number and branch code are correct as per the ACB/BDB provisions of this institution.



**Bank stamp**

\_\_\_\_\_  
**Signature of Bank Manager**