	EMPLOYEE BANK DETAILS CH	HECKLIST	
Name of Employee			<u> </u>
Persal Number			
District			
Tick box	For existing in Service Em	ployee	
Fully completed E	mployee Banking Form		
Certified copy of !	D. document		
Declaration form s	igned by Principal/ Superviso	or.	
New account-bank	statement (Original bank star	mp)	
Old account- bank s	tatement (original bank stam	np)	
Letter from the emp	loyee declaring bank change	**************************************	
	*		
	ad Office		
ompiler Ca	pturerApprover	Authoriser	
gnatureSig	gnature Signature	Signature	