

Direct Deposit Authorization



STUDENT INFORMATION

Name (please print clearly): _____

Student ID Number: _____

Account Information (check one): New Change

_____% Percent applied to your student account (Enter whole numbers only: 100%, 85%, etc.)

- Election of 100% - all earnings applied to student account
- Election of 1-99% = the elected percentage of earnings is applied to the student account and the remaining percentage is applied to a personal bank account
- Election of 0% = all earnings to a personal bank account

AND/OR

Account Type (check one): Checking Account Savings Account

This form allows you to activate or change your financial institution for payroll. Your payroll earnings will automatically be deposited into your financial institution account by providing the following:

PROVIDE INFORMATION FROM YOUR FINANCIAL INSTITUTION

Bank Name: _____

Routing Number: _____

Account Number: _____

SIGNATURE

I authorize Gustavus Adolphus College to initiate electronic entries to my indicated checking or savings account and/or student account. In the event of an error, I also authorize Gustavus Adolphus College to direct my bank to return any deposited funds to which I was not entitled by debiting my bank or student account as appropriate.

Signature: _____ Date: _____

OFFICE USE ONLY:

Human Resources Student Accounts Financial Aid