



ST. JOHN'S UNIVERSITY

STUDENT FINANCIAL
SERVICES

Authorization for Direct Deposit of **Student Refund**

1. Read and complete the information requested below.
2. The bank you specify must be a member of the Automated Clearing House. Contact your bank to obtain the bank code.
3. Determine where you want your payment deposited. You may have it deposited in any of your existing savings or checking accounts.
4. Provide details concerning your bank account.
5. For checking accounts, attach an unsigned personal check with the word "VOID" written across the face of it. Do not sign the check. For savings accounts, attach a copy of a deposit slip.
6. Return this completed agreement directly to the Office of Student Financial Services, or fax to 718-990-8284.

Please sign me up for Direct Deposit. I authorize St. John's University to deposit payments into the account named below. This authority will remain in force until I have given written notice that I have terminated it or until St. John's University has notified me that this deposit service has been terminated. I understand that I must give advance notice to allow reasonable time for my instructions to be executed. If ever an incorrect amount should be deposited to my account, I authorize my bank and St. John's University to make the appropriate adjustment.

New Change Cancel

PLEASE PRINT STUDENT INFORMATION.

Name: _____ X-Number: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail Address (required): _____ Tel: _____

Bank Code: | : | _____ | : | Bank Name: _____

Your bank's code (ABA number) appears at the bottom left of your check between the marks indicated.

Account Number: _____

Checking Savings Money Market

Branch Address: _____

Student Signature: _____ Date: _____

Type of Student (check one): Undergraduate Graduate Law