



## DIRECT DEPOSIT AUTHORIZATION FORM

Students who desire to have payments directly deposited to an account or to apply work study payments to their student account should complete this form and return it to the Office of Administrative Services (formerly Business Office).

You have the option of depositing all or part of your applicable student payments into a checking/savings account or to your student account. You may exercise that option by indicating your instructions below.

Name: \_\_\_\_\_ Student ID: #: \_\_\_\_\_

Please deposit my check as follows:

Apply to Student Account:  YES  NO

OR

Bank Name and Location: \_\_\_\_\_  
\_\_\_\_\_

Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings

Routing/Transit Number\* \_\_\_\_\_  
First 9 digits on check

Account Number: \_\_\_\_\_

*\*Please attach a voided copy of your check showing the appropriate account numbers. Note - This information will only be required if it has not already been provided to the Office of Administrative Services.*

I hereby authorize and request University of the Ozarks to deposit my work study payments to my student account as noted above. If the payments noted above exceed the amount of my student account, I authorize the University to deposit remaining payments to the bank account noted above. I also authorize University of the Ozarks to initiate such debit entries to said account as may be required to correct any erroneous entries to make necessary adjustments.

I also authorize the University to email my confirmation of these payments to my Ozarks email address. The confirmation will be emailed to my Ozarks email the day payment is processed.

I will notify the Office of Administrative Services in writing if I want either of these processes stopped.

\_\_\_\_\_  
Ozarks Email Address

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date