

CommuteSmart- Direct Deposit Authorization Form

I hereby authorize Palo Alto University Business Office to:

- START** - New Direct Deposit **STOP** - Direct Deposit (Designate the account to stop)
 CHANGE - my Direct Deposit as follows:

Student Instructions:

1. Complete the required information section.
2. Sign and date the form.
3. **Sending Options:**
 - o Password protect the pdf form and Email it to lthomas@paloaltou.edu. Send the password in a separate email or text it.
 - o Text your direct deposit information to Lori Thomas, 408-460-6833
 - o Print/mail a hard copy to: Palo Alto University - ATTN: Lori Thomas - 1791 Arastradero Road, Palo Alto, CA 94304

STUDENT REQUIRED INFORMATION
PLEASE PRINT

Student Name _____

Social Security # (Last 4 digits only): ____ ____ ____ ____

DIRECT DEPOSIT INFORMATION

I would like my student refund deposited to the bank account:

CHECKING
 Bank Name: _____
 Bank Routing Number _____ Account Number: _____
 (MUST be 9 digits)

SAVINGS
 Bank Name: _____
 Bank Routing Number _____ Account Number: _____
 (MUST be 9 digits)

I hereby authorize Palo Alto University to deposit any amounts owed me by initiating credit entries to my account at the financial institution (hereinafter BANK) indicated above. Further, I authorize BANK to accept and to credit any credit entries indicated by Palo Alto University to my account. In the event that Palo Alto University deposited funds erroneously into my account, I authorize Palo Alto University to debit my account for an amount not to exceed the original amount of the erroneous credit. This authorization is to remain in full force and effect until Palo Alto University and BANK have received written notice from me of its termination in such time and in such manner as to afford Palo Alto University and BANK a reasonable opportunity to act on it.

I authorize for Palo Alto University to send all payments via direct deposit, including tuition refunds

Student Signature: _____ **Date:** _____