

CommuteSmart- Direct Deposit Authorization Form

	Instructions:
 Comp 	plete the required information section.
_	and date the form.
	ing Options:
	Password protect the pdf form and Email it to <u>jtorres@paloaltou.edu</u> . Send the password in a separate email wolank subject line.
	Fax to: Jerry Torres, 650-433-3869.
	Print/mail a hard copy to: Palo Alto University - ATTN: Jerry Torres - 1791 Arastradero Road, Palo Alto, CA
	STUDENT REQUIRED INFORMATION
	PLEASE PRINT
Stud	ent Name
Staa	
Stad	
	al Security # (Last 4 digits only):
	al Security # (Last 4 digits only):
	al Security # (Last 4 digits only):
	al Security # (Last 4 digits only):
	al Security # (Last 4 digits only): DIRECT DEPOSIT INFORMATION
	DIRECT DEPOSIT INFORMATION
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account:
	DIRECT DEPOSIT INFORMATION
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name:
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name:
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name:
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name: Bank Routing Number Account Number: (Paper/Electronic routing # is needed, NOT the Wire routing #)
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name:
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name: Bank Routing Number Account Number: (Paper/Electronic routing # is needed, NOT the Wire routing #) SAVINGS Bank Name:
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name: Bank Routing Number Account Number: (Paper/Electronic routing # is needed, NOT the Wire routing #) SAVINGS Bank Name: Bank Routing Number Account Number:
	DIRECT DEPOSIT INFORMATION I would like my student refund deposited to the bank account: CHECKING Bank Name: Bank Routing Number Account Number: (Paper/Electronic routing # is needed, NOT the Wire routing #) SAVINGS Bank Name:

Student Signature: ______ Date: _____

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