

**BEMIDJI STATE UNIVERSITY ** DIRECT DEPOSIT
FINANCIAL AID FUNDS ___ PAYROLL ___ AUTHORIZATION**

(check which option applies above-can check both)

To start, change, or stop your direct deposit, put an X in the appropriate box and follow the instructions for that box. Please return this form to the **Business Office** upon completion-Aid Disbursement to Room 202-Payroll to Room 201 in Deputy Hall. It can be mailed to Bemidji State University, 1500 Birchmont Dr. NE #7, Bemidji, MN 56601-2699. Students are limited to either checking or savings for both.

- Start** **Complete all boxes below (1-10)**
- Change bank or account number** **Complete all boxes below (1-10)**
- Stop** **Complete Boxes 1,2,3,4, and 10 below**

1	Student Name (Please print)	2	BSU ID # (Required)
3	Social Security Number (*Optional)	For Business Office Use	

NOTE on Numbers 6 and 7: If you are not sure what the numbers are for Boxes 6 and 7, contact your financial institution or bring this form and your bank account information to the **Business Office, Deputy 202.**

4	Financial Institution (Bank) Name	5	Address of Bank (City and State Located)
6	Bank Transit Routing Number	7	Bank Account Number (length varies)
	_____ (9 digits)		

8	Type of Account. You must indicate either checking or savings, but not both.
	<p>___ Checking – You must provide a voided check along with this form.</p> <p>___ Savings – You must provide a savings deposit slip along with this form.</p>

9	I understand that the direct deposit amount will be the entire amount of financial aid ** overage I am scheduled to receive and that funds may take up to 48 hours before they reach my account.
10	<p>I authorize Bemidji State University and my financial institution indicated above to initiate electronic credit entries (direct deposit) of my student financial aid ** overage and, if necessary, debit entries and adjustments for any credit entries made in error to my account. I understand that I may have my financial aid overage direct deposited to only one financial institution, and that this authorization will continue until I notify the Business Office in writing of a change or request to stop this direct deposit. I understand that if I fail to notify the Business Office of any account changes, I am responsible for any delays in receiving my financial aid overage and any additional fees charged against my bank account, such as insufficient fund costs.</p> <p>_____</p> <p>Student Signature _____ Date</p> <p>_____</p> <p>Phone Number _____ E-mail Address</p>

* You are not required to furnish your Social Security number. If furnished it will remain private and within the **Business Office System.**

** Financial aid for direct deposit is limited to funds electronically disbursed. It does NOT include alternative loans disbursed by check.