

STUDENTS ONLY

RICE UNIVERSITY

AUTHORIZATION FOR AUTOMATIC DEPOSITS

Name: _____ Student ID #: _____

I hereby authorize Rice University to initiate credit entries and, if necessary, debit entries for adjustment to any credit entries made under this program to my account number indicated below to credit and/or debit the same to such account. This authority may be terminated upon ten days' written notification of termination from Rice University. You will need official bank documentation (i.e. check, direct deposit form, account info card, letterhead, or screen print clearly displaying routing and account information.)

Depository Financial Institution Information

Financial Institution Name: _____
(Attach Bank Document)

Routing / ABA No.: _____

Account Number: _____

Type: Checking Savings Amount or Percentage 100%

**This form will be used for both Payroll and expense reimbursements.
Your check stub will be suppressed and can be viewed online through Esther.**

Student Information

Phone: _____ Email: _____

Signature: _____ Date: _____

****You are required to attach an official bank document for this account for our records****

PAYROLL USE ONLY:

Pre Notification: _____ Date: _____ By: _____

Verified Payment: _____ Date: _____ By: _____