

Office of the Vice President and Chief Financial Officer Finance and Accounting Division *University Bursar* http://www.fa.ufl.edu S113 Criser Hall PO Box 114050 Gainesville, FL 32611-4050 352-392-0181 352-392-3448 Fax

## DIRECT DEPOSIT AUTHORIZATION FORM

**To Add or Change Direct Deposit Information** 

UFID 1	Number:
Studen	t Name:(Please print)
	check one: Add Direct Deposit Enrollment □ Change Direct Deposit Enrollment Information
	Please attach <b>voided</b> check that includes the student's name imprinted on the check or bank document with student's name, checking account number and routing number for account verification.
	Name of Financial Institution:
	Telephone Number of Financial Institution:
	9 – Digit Bank Routing Number:
	Checking Account Number:
	Cancel authorization for Direct Deposit. Reason for cancellation:
only va	rize the University of Florida to add or make changes as indicated above. This direct deposit is alid for checking accounts only. I also understand that the University of Florida requires a able amount of time to process this request.
Signatu	ure Date

## **IMPORTANT**

TO "ADD" OR "CHANGE" YOUR DIRECT DEPOSIT INFORMATION, ATTACH A NEW "VOIDED" BLANK CHECK OR BANK DOCUMENT SHOWING THE NEW ROUTING AND/OR CHECKING ACCOUNT NUMBER. DO NOT ATTACH A DEPOSIT SLIP SINCE BANKING CODES ARE NOT VALID FOR DIRECT DEPOSIT

(Please attach check here)

The form will need to be submitted in person, by mail or faxed to our office. If you have any questions regarding direct deposit, please call 352-392-0737 or visit University Bursar in S113 Criser Hall.