



Authorization Form for Direct Deposit

Date: _____

ID# @ _____

Please complete the section below so that all funds can be deposited into the designated account.

I _____ authorize Howard University to initiate credits/debits to my
(Student Name)
checking/savings account shown below:

If monies to which I am not entitled are deposited to my account, I authorize Howard University to direct the financial institution to return said funds.

This authorization is to remain in full force and effect until Howard University has received written notification from me/us (or my banking institution) of its termination in such time and in such a manner as to afford Howard University and/or financial institution(s) a reasonable opportunity to act on it.

_____	_____	_____
Student Signature	Date	Contact Number

Note: Once a completed direct deposit form has been processed, all changes must be submitted in writing.

If there is a Parent Plus Loan included in your aid, the parent MUST give authorization for direct deposit by signing below:

I _____ authorize Howard University to initiate credits/debits to my
(Parent Name)
checking/savings account.

_____	_____	_____
Parent Signature	Date	Contact Number

*** Howard University should be notified of any changes to your bank account immediately.***

A VOIDED CHECK OR DIRECT DEPOSIT SIGN-UP FORM MUST BE ATTACHED TO THIS FORM TO BE PROCESSED

You may return the Direct Deposit Form by utilizing any of the following options:

(1) By Mail, send forms to:

Tyrone Pitts or Maurice Graham
Office of the Assistant Treasurer
Howard University
2400 6th Street, NW Rm. 310
Washington, DC 20059

(2) By Fax

(202)-806-9533
Attn: Tyrone Pitts
or Maurice Graham

(3) Drop Off:

Office of the Assistant Treasurer
Room 310, located on the 3rd floor
of the Administration Building
or
Check Disbursement Center
510 College Street