

## Student Authorization for Direct Deposit of Net Pay

Student Legal Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_  
(Please Print)

Last 4 digits of Social Security Number: \_\_\_\_\_

I hereby authorize and request George Fox University to deposit my net pay to the following account:

My Account is (check one):  Checking/Share Draft OR  Savings

**IMPORTANT:** I understand that this Authorization will stay in effect until I notify Human Resource in WRITING to have it stopped. I agree to receive my pay statements electronically and understand that I can view (and print) them at [mygfugorgefox.edu](http://mygfugorgefox.edu)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return to Kasondra Silva at Box #6108.**

**A form from your bank with routing and account numbers must accompany this form. (A voided check will also be accepted for checking accounts, but not for savings accounts.)**



Bank Routing Number  
digits between the '1' characters

Your Account Number

Check Number