

Business Financial Services

ADMINISTRATION BLDG. 2200 BONFORTE BLVD. PUEBLO, COLORADO 81001-4901 719 549-2181

FAX: 719 549-2088

DIRECT DEPOSIT AUTHORIZATION FORM

I authorize Colorado State University-Pueblo to electronically deposit **excess financial aid funds and student payroll checks** into my designated Bank Account. I understand that I may cancel this authorization at any time by submitting the signed "Direct Deposit Cancellation" form found under Student Billing (in the Business Financial Services area of the website).

Name (Please Print):		
CSU-Pueblo PID Number:		
Phone Number:		
Bank Name:		
Bank Account Number:		
Bank Routing Number (9 digits):		
Checking Account	Savings Account	
Please attach a voided check or paperwork from below.	n the bank so that we may	verify the above information; sign and date
If a voided check cannot be attached, please in correct information is given, it may take up information.		
Signature		Date
Office Use Only:		
Identification verified: (circle one) YES NO		Date:
Type: (circle one) CSU-Pueblo ID License/ID	Personally Known	Other:
Print Name	Signature	