

**NICHOLLS STATE UNIVERSITY**  
**DIRECT DEPOSIT OF CREDIT BALANCE AUTHORIZATION FORM**

*(Please print or type)*

Student Name	Student ID #
Action Type (check one) <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE <input type="checkbox"/> STOP DIRECT DEPOSIT	Effective Date

**BANK ACCOUNT**

Financial Institution Name	
Account Number	Financial Institution Routing (ABA) Number

**Account Type (check one)**

<input type="checkbox"/> CHECKING <b>** (Provide voided check or account information from bank for verification) **NOT DEBIT CARD**</b>	<input type="checkbox"/> SAVINGS <b>** (Provide copy of savings account card or information from bank with account information for verification)</b>
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I authorize Nicholls State University to automatically deposit my credit balance to the Bank specified above. I also authorize the Bank to accept this deposit for my account and to make adjustments to my account that correct any error relating to those deposits. I agree that Nicholls State University will have no responsibility for personal checks written against my account, and that my account will be administered in accordance with the rules and regulations of the Bank. This authorization will remain in effect until revoked by me in writing or cancelled by the Bank. In the event my account information changes and I fail to notify the Controller's Office, my funds may not be available for immediate release causing a delay in payment.

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**\*\*STUDENT'S NICHOLLS E-MAIL ADDRESS IS REQUIRED (please print or type)**

**\*\* (All correspondence must be from student's Nicholls e-mail, otherwise it will not be processed.)**

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Phone number where you may be reached between 8:00 a.m. and 4:30 p.m.

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Signature of Student

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Date

**The completed form and voided check or copy of account card (from bank with account number and bank routing number - NOT DEBIT CARD) may be dropped off at the Fee Collection Center in Elkins Hall, faxed to (985) 449-7025 or (985) 449-7098, scanned and emailed from the student's Nicholls e-mail account to controllers.office@nicholls.edu, or mailed to us at:**

**Nicholls State University  
Accounts Payable  
P.O. Box 2003  
Thibodaux, LA 70310**