



Office of Financial Aid

**Direct Deposit Agreement Form**     **Setup Direct Deposit**     **Change Direct Deposit**

**Authorization Agreement**

I hereby authorize **Niagara University** to initiate automatic deposits to my account at the financial institution named below. I also authorize **Niagara University** to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold **Niagara University** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **Niagara University** receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Student Records & Financial Services Office.

**Account Information**

Name of Financial Institution: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_      Checking       Savings

**\*\*Please be aware that it will take at least two (2) paychecks before the direct deposit will go into effect\*\***

**Signature**

Authorized Signature \_\_\_\_\_ **Date:** \_\_\_\_\_

Printed Name: \_\_\_\_\_ **Date:** \_\_\_\_\_

Student ID Number \_\_\_\_\_

Student Telephone Number \_\_\_\_\_

**Please attach a voided check or deposit slip and return this form to the Student Records & Financial Services Office.**

**\*Go Green Initiative - Niagara University is committed to finding ways of reducing its impact on the environment through saving paper. You can help by receiving your pay statements electronically. If you would like information on how you can help us go green and access your statements electronically please provide your email address below.**

Electronic Pay Statements \_\_\_\_\_  
e-mail address \_\_\_\_\_ date \_\_\_\_\_