



Student Direct Deposit Refund Enrollment Form

Drop, Fax or Mail completed form to:

UNLV Cashiers Office
4505 Maryland Parkway Box 451015
Las Vegas, NV 89154
Fax: (702) 895- 1164

THIS IS: **NEW REQUEST** **CHANGE OF BANK INFORMATION**

<p>Student Name: (Please print clearly) _____</p> <p>UNLV ID #: L _____ SSN: _____ Phone: _____</p> <p>Bank Name: _____</p> <p><input type="checkbox"/> Checking (Attach a voided check) <input type="checkbox"/> Savings (Attach a letter from your financial Institution which confirms)</p> <p>ACH Routing # (9 digits) _____ ACCT# _____</p>
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I hereby authorize the University of Nevada, Las Vegas to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any entries in error to my (our) account indicated above and the depository to credit and/or debit the same to such account.

Signature

Date

<p>PLACE VOIDED CHECK HERE</p>

To cancel Direct Deposit Fill out the above student information and sign below. Return to the UNLV Student Accounts Office, Donald Reynolds Student Services Building (SSC), Room 133. I hereby cancel the authority previously given to UNLV by written notification from me of its termination in such time and in such manner as to afford UNLV and its depository to act on it.

Signature

Date