



CASHIER'S OFFICE
Missouri University of Science and
Technology
G-4 Parker Hall
Rolla, Missouri 65409-1160
(573) 341-4194 or 4195

DIRECT DEPOSIT FORM

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

I hereby authorize Missouri University of Science and Technology to direct deposit my student fee account refund(s) into the bank account identified below. This authorization is to remain in force and effect until I initiate a change in such time and in such manner as to afford the University and Bank a reasonable opportunity to act upon it.

Name: _____ Date of Birth: _____
Student ID NO. _____ S&T E-Mail Address: _____
Bank Name: _____ Bank Account NO.: _____
Bank Routing Number _____ Type of Account: Checking Savings
Signature: _____ Date: _____

New Authorization Change on Previous Authorization

**PLEASE ATTACH A VOIDED CHECK TO BE USED TO VERIFY ACCOUNT INFORMATION
AND RETURN COMPLETED FORM WITH VOIDED CHECK TO:**

CASHIER'S OFFICE
Missouri University of Science and Technology
G-4 Parker Hall
Rolla, Missouri 65409-1160

Completed forms can also be faxed or emailed:

Email: cashier@mst.edu
Fax: (573) 341 4095

For questions, please contact the Cashiers Office