

AUTHORIZATION FOR DIRECT DEPOSIT OF STUDENT REFUNDS

- See Section 7 on the reverse side for instructions on how to complete the form.
- Return the completed form to Fiscal Services, 198 McAllister Street, Room 111 or mail to 200 McAllister Street, San Francisco, CA 94102. Fax the form to: 415-565-4698, Attention: Ms. Maria Catig.
- Form must be received by Monday, December 15, 2003 for spring 2004 refunds.

SECTION 1.		TRANSACTION TYPE (Select only one)	
1. <input type="checkbox"/> NEW SET UP (Complete Sections 1, 2, 3, & 5 or 6)		3. CHANGE (More than one type of change may be selected)	
2. <input type="checkbox"/> CANCELLATION (Complete Section 1, 2 & 3)		<input type="checkbox"/> Change Financial Institution (Complete Sections 1, 2, 3 & 5 or 6) <input type="checkbox"/> Change Account Number (Complete Sections 1, 2, 3 & 5 or 6) <input type="checkbox"/> Change Account Type (Complete Sections 1, 2, 3 & 5 or 6)	

SECTION 2.		STUDENT INFORMATION (Please Print)			
4. Hastings 7-digit identification number		5. Telephone number			
		()			
6. Name (Last, First, MI)					
7. Street Address		8. City		9. State	10. ZIP code

SECTION 3.		AUTHORIZATION FOR NEW SETUP, CANCELLATION OR CHANGE OF EXISTING SET UP			
<p>11. I authorize UC Hastings College of the Law to initiate appropriate and necessary electronic credit entries and to initiate, if necessary, electronic debit entries and adjustments for any credit entries issued in error to my <input type="checkbox"/> Checking <input type="checkbox"/> Savings account (choose only one).</p> <p>I understand that I will not receive an electronic credit for refunds owed to me but will receive a paper check if:</p> <ul style="list-style-type: none"> ▪ I fail to provide complete and accurate information on this form or ▪ I have a hold(s) on my Hastings' student record or ▪ Upon release of the credit entry to the Automated Clearing House (ACH) my deposit is rejected. <p>I understand that the Office of Fiscal Services will notify me via my Hastings' e-mail address or via my SIC folder that my funds have been released for deposit into my designated account or that my direct deposit was rejected and that a paper check will be issued.</p> <p>I understand that it is my responsibility to immediately notify Records, Financial Aid and the Office of Fiscal Services if my enrollment and/or financial aid status changes.</p> <p>I understand it is my responsibility to ensure that said funds are in the designated bank account before any withdrawals are made.</p> <p>I understand that a new authorization agreement must be completed if I change or close my account and that this agreement will remain in effect until cancelled by me in writing or until I graduate from Hastings, whichever comes first.</p> <p>I agree and understand that neither the Board of Directors of Hastings College of the Law nor any Officer or employee thereof shall be held responsible or liable for any inadvertence or error in withholding or transmitting my residual financial aid refunds to the financial institution I have indicated.</p>					
12. Printed name		13. Authorized signature		14. Date	

SECTION 4.		PRE-NOTIFICATION (PRE-NOTE)			
<p>15. Upon receipt of this authorization form a test (pre-notification) transaction will be sent to the designated financial institution to confirm the accuracy of the routing and account number. This notification will result in a \$0.00 deposit transaction posting to your account. Prenotification will occur each time you change your account.</p>					

SECTION 5.	VOIDED CHECK (Affix check in the space below)
<p>16. Attach here a <u>preprinted</u> check across which you have written "VOID" bearing the account name (your name), the institution (name of your bank), the bank routing number (the 9-digit number printed in the lower left-hand corner of your check) and the account number.</p> <p style="text-align: center;"><u>VERIFY THE ROUTING NUMBER.</u></p> <p style="text-align: center;">Banks often have different routing numbers for electronic credits. Confirm with your bank if this is the case. If so, do not attach a voided check and go to SECTION 6.</p> <p style="text-align: center;">If you are unable to provide a voided check or want your funds deposited into your savings or investment account SECTION 6 must be completed by your financial institution</p>	

SECTION 6.	FINANCIAL INSTITUTION (To be completed for deposit in a savings or investment account)	
17. Financial institution name	18. City	19. State
20. Transit routing number for electronic credits (9 digits)	21. Account number	22. Type of account (select only one) <input type="checkbox"/> Checking <input type="checkbox"/> Saving
23. Representative name (Please Print)	24. Title	
25. Representative signature	26. Phone number	27. Date

SECTION 7.	INSTRUCTIONS FOR COMPLETING AUTHORIZATION FORM
<p>28. Contact the Office of Fiscal Services at (415) 565-4704 if you have any questions on the direct deposit process or on completing this form. This form must be completely and accurately filled out and submitted to the Office of Fiscal Services for processing.</p> <ul style="list-style-type: none"> ▪ Boxes 1, 2 & 3 – indicate a new set up, cancellation or change to an existing set up. ▪ Box 4 - your 7-digit Hastings' ID# can be found on your Hastings ID card. ▪ Boxes 5 through 10 – complete all boxes with requested information. ▪ Boxes 11 thru 14 - read the authorization carefully and sign where requested. ▪ Box 16 – affix a voided check from your checking account in the space provided. If your bank uses a different routing number for electronic credits than that printed on your voided check then skip box 16 and have boxes 17 through 27 completed. ▪ Boxes 17 through 27 – if you are unable to provide a voided check or want your funds deposited into a savings or investment account, a representative of the institution receiving your deposit must complete these boxes. <p><u>ADDITIONAL INFORMATION:</u></p> <ul style="list-style-type: none"> ▪ The first deposits for spring 2004 will be made on January 14, 2004; thereafter, deposits will be made twice a week. ▪ Make a copy of this form for your records. ▪ Any electronic notices sent regarding the direct deposit transaction(s) will be sent to you via your Hastings' e-mail account. If you do not use this account, it is your responsibility to ensure that sent mail is forwarded to your preferred account. ▪ At any time your direct deposit is rejected this Agreement will be voided and all future residual financial aid refunds will be issued to you by paper check until you submit a new form authorizing a new set up. ▪ Do not withdraw your funds until you have confirmed that they are deposited into your account. ▪ If after being notified that Hastings issued your direct deposit your funds are not received, contact Fiscal Services to place a tracer. 	

FISCAL OFFICE USE ONLY			
29. ARAC data entry by:	31. ARAC verification by:	33. ARAC deleted by:	35. ARAC deletion reason:
30. ARAC data entry date:	32. ARAC verification date:	34. ARAC deletion date:	