



Cornell College

Please attach ID here:

You must open this form in
Adobe Reader or Acrobat to
upload a photo.

STUDENT ACH AUTHORIZATION FORM

I authorize Cornell College to electronically deposit funds for work study/payroll to the bank account noted below via Automated Clearing House (ACH) in accordance with applicable provisions of U. S. law.

STUDENT NAME:

STUDENT ID:

STUDENT EMAIL:

@cornellcollege.edu

ID Example: 100#####

**Please print name as it appears on the bank account*

PRIMARY ACCOUNT INFORMATION

Select One: Checking Account

Savings Account

Bank Name:

Bank City, State and Zip:

Bank Routing Number:

Bank Account Number:

This authorization will remain in effect until the College receives written notification of change or cancellation from me. I understand that if I fail to notify Payroll in a timely manner that my account has changed or been canceled and the funds are not able to be deposited into my account, a replacement check will be produced only upon receipt of the original funds back into the College bank account. This could take up to two weeks.

In the event that funds are erroneously deposited to the undersigned's bank account, I authorize Cornell College to direct my bank to return any deposited funds to which I was not entitled by adjusting my bank account as appropriate.

Signature: _____ Date: _____

***This form must be submitted with a photo of you holding your photo ID (driver's license or student ID), with your face and detail clearly legible. Please attach to the top, right hand corner of this form with your face and detail clearly legible.**

***If the ID is not clearly legible in the photo, a copy of the ID must also be included.**

***When uploading a file, the file name must begin with: last name, first name, 9-digit student ID number (Doe, Jane, 100_____, ACH). Improperly formatted files may not be processed.**

FOR BUSINESS OFFICE ONLY:

Verified By/Date:

Payroll:

Entered By/Date:

Allow 7 to 10 business days for processing.