

COLUMBIA COLLEGE HOLLYWOOD
Student Authorization Form For Direct Deposit Refunds

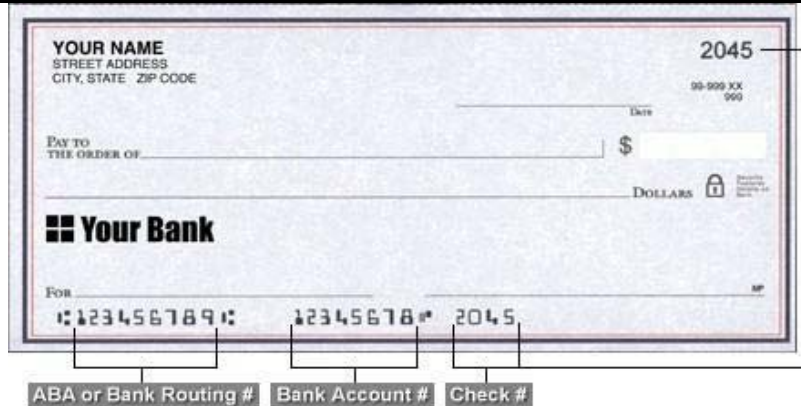
Complete this form to have your financial aid refund directly deposited into your bank account. Financial aid refunds result when the amount of your financial aid for a specific academic term exceeds your charges for that term. Your student account must reflect a credit balance before any refund is issued. Direct Deposit is a faster and safer way to receive your student refunds as the funds become available sooner to you and the risk of lost or stolen checks is removed. You can always check the balance of your student account refund online at <https://cchonline.columbiacollege.edu>.

Student Name: _____ Student ID #: _____

Address: _____ City _____ State _____ Zip _____

Bank Name: _____ Account #: _____ Bank Routing #: _____

Attach Voided Check Here. For Savings Accounts, Please Attach A Deposit Slip.



This Bank Account is for the Student / Parent (circle one)

I authorize Columbia College Hollywood (CCH) to initiate credit entries to my checking or savings account shown above for the purpose of refunding excess financial aid. I also authorize CCH to initiate debit entries to this account solely in order to adjust or correct an error resulting from a deposit or credit entry made under this authorization. This authorization is to remain in full force and effect until CCH has received written notification of its termination in such time and in such manner as to afford CCH reasonable opportunity to act on it. I also agree to notify the Business Office of any bank or account change relevant to this authorization. CCH is not responsible for any banking errors or bank fees resulting from incorrect information. CCH reserves the right to determine if a refund check is deposited electronically or if a paper check will be issued. **If a Parent PLUS loan is included in your financial aid package, the parent who initiated the Parent Plus loan must sign below also.**

Student Signature _____ Date _____

Parent Name _____ Parent Signature _____ Date _____

Bring this completed form to the Business Office or fax it to (818) 345-8153.