Automatic Payment Authorization Form

☐ New Authorization ☐ Change Authorization ☐ Cancel Authorization

Student's Name: _____

Student's Social Security Number: _____

Bank Name: _____

Bank Address: _____
Number and Street *City, State, and Zip*

Bank Routing Number: _____
(The first 9 digits appearing in the lower left corner of the check)

Bank Account Type: ☐ Checking or ☐ Savings (choose only one)

Checking Account # _____ or Savings Account # _____

I hereby authorize Tennessee Tech University to electronically debit my account in the amount of $_____ on or after the 1st of each month as payment for my Federal Perkins loan.

I understand in the event this debit cannot be processed due to non-sufficient funds (NSF), I will be subject to a $5.00 late charge and a $20.00 service fee that may also be debited from the above account. I also understand that this method of payment may be canceled if two (2) transfers in any twelve (12) month period are returned unpaid.

This authorization will remain in effect until an official written cancellation request is received by the Loan Accounting Department or until my loan(s) are paid in full.

A new authorization MUST be completed if I change or close my bank account or if I change my financial institution.

This form must be returned to the Loan Accounting Department by the 15th of the month for it to be in effect for the following month's payment.

_____ _____ _____
Signature Phone number Date

PLEASE ATTACH A VOIDED CHECK (NOT A DEPOSIT SLIP)

Automatic Payment cannot be initiated without a voided check

Please print this document, complete the requested information including signature and date, attach a voided check, and mail to:
TTU BUSINESS OFFICE
Loan Accounting Department
P.O. Box 5037
Cookeville, Tennessee 38505