

Direct Deposit Authorization for Scholarship Funds

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Scholarship Provider's Name]

[Scholarship Provider's Address]

[City, State, Zip Code]

Dear [Scholarship Provider's Name],

I am writing to authorize the direct deposit of my scholarship funds into my bank account. Below are my bank details for the direct deposit:

Bank Name: [Your Bank Name]

Account Holder's Name: [Your Name]

Account Number: [Your Account Number]

Routing Number: [Your Routing Number]

Please process this request at your earliest convenience to ensure that the funds are deposited directly into my account.

Thank you for your assistance. If you require any further information, please do not hesitate to contact me.

Sincerely,

[Your Name]

[Your Student ID if applicable]