



Banking Authority Form

Student Name

Name of Financial Institution

Address/Branch of Financial Institution

6 digit Bank/State/Branch Number (BSB) for Australia/ or Swift Code for overseas

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Account Number (up to 9 digits for Australia/ or 17 digits for overseas)

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Name of Account Holder

Conditions of Use of EFT: -

- Future payments by the University of Sydney will be by EFT/TT.
- Changes in the above particulars are to be notified immediately to Manager, Accounts Payable, Margaret Telfer Building K07, University of Sydney.
- The above-named student agrees to repay to the University of Sydney on demand any payments credited to the student in error. The University of Sydney reserves the right to set off the amount of any overpayment made in error against any future debt or liability owing to the University of Sydney by the student.
- The University of Sydney reserves the right at any time to terminate or suspend this EFT/TT payment system and to pay by any other manner which the University of Sydney may determine from time to time.

I agree to the above conditions.

First Name: _____ Surname: _____

Student Number: _____ Name of Scholarship: _____

Phone: _____ Signature: _____

Date of Birth: _____ Date: _____

Please return this form to:
Scholarships and Prizes Office
Jane Foss Russell Building (G02)
University of Sydney NSW 2006