GRANT PAYMENT DEPOSITS

NAME:	COUNTRY OF GRANT:
To do this effectively, depos	US students must be made to the grantee in US dollars in the United States. sits, insofar as possible, will be made by IIE via Electronic Funds Transfer bunt you designate. To effect this process, please:
2. Determine where you wa3. Supply details concerning	Authorization Agreement. ant your payment deposited. g your existing checking account. to your IIE Program Manager.
Automatic Grantee Award	d Deposit AUTHORIZATION AGREEMENT
I have given 45 days written notic	f my payments directly into the account named below. This authority remains in force until the that I have terminated it or until IIE has notified me that this deposit service has been amount should be entered into my account, I authorize IIE, in conjunction with my bank, to
Home Address	
City, State, Zip Code	
Grantee Signature	Date
	deposit your payment in an existing checking account listed below. eposit the entire amount into the existing checking account listed below.
Bank Name*	
Branch Address	
Checking Account Numb	oer
ABA Routing Number (fir	rst 9 digits only)

NOTES:

- 1. Attach a check from THIS account with the word "VOID" written in large letters in ink across the face of it. **DO NOT SIGN THE CHECK.**
- 2. Deposits of funds through electronic transfer will be noted on your checking statement as **EFT—IIE**.

^{*} The bank you specify must be a member of an Automated Clearing House. If not, IIE will let you know so you can make an alternate choice.