

**APPLICATION FOR ELECTRONIC FUNDS TRANSFER (EFT)**

I hereby authorize Kentucky Higher Education Student Loan Corporation (The Student Loan People<sup>SM</sup>) to initiate debit entries to my bank account indicated below and also authorize the financial institution named below to debit the same to such account. I understand that my monthly payment amount may change under certain circumstances. I understand that my student loan account must be current before I am eligible to apply for the Electronic Funds Transfer (EFT).

Preferred Due Date (Check One):  1<sup>st</sup>  5<sup>th</sup>  10<sup>th</sup>  15<sup>th</sup>  20<sup>th</sup> (The 10<sup>th</sup> will be used by default)

Financial Institution Name: \_\_\_\_\_

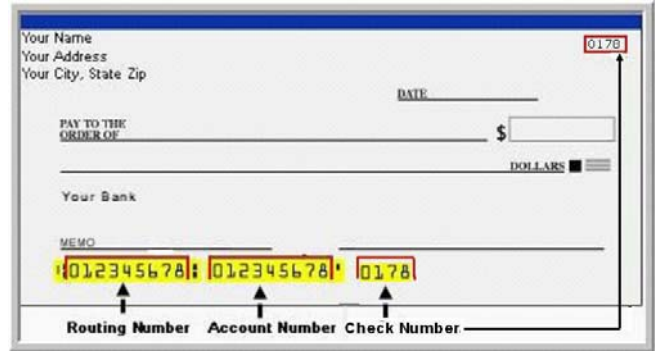
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account Number:  Checking  Savings\*

\_\_\_\_\_  
*\*Please confirm savings account number with your bank.*

Transit Routing (ABA) Number:

\_\_\_\_\_  
*Routing number is always nine digits*



*The above image is a sample of where most financial institutions display the routing and account numbers. If your check does not display information in the same manner, please contact your financial institution to obtain this information.*

Changes to the monthly payment amount must be requested in writing to the address listed below.

This authority is to remain in full force and effect until The Student Loan People and the above named financial institution have received notification from me of its termination in such manner as to afford The Student Loan People and the depository a reasonable opportunity to act on it.

Name: \_\_\_\_\_ SSN or Account #: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home/Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Bank Account Owner Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

*\*Required only if the bank account owner is different than the borrower.*

To initiate EFT from your checking account, please mail or fax a voided check **and** this completed form to the address listed below. To initiate EFT from your savings account, please mail or fax a deposit slip **and** this completed form to:

**Fax: (502) 329-7077**

The Student Loan People  
PO Box 24328  
Louisville, KY 40224-0328

**IMPORTANT INFORMATION ABOUT ELECTRONIC FUNDS TRANSFER**

**Right to stop payment and procedure for doing so:** You have the right to discontinue this service. Call **1-800-693-8220** (The Student Loan People) or **1-888-250-6401** (Access Group, Inc.) **at least five business days before the payment is due to discontinue the EFT payment. If at any time your bank account or routing information needs to be changed, you must submit those changes in writing to our office at least five days prior to your EFT payment date.**

**Additional Payment Information:** Additional payments may advance your due date, which may cause your scheduled monthly payments not to pull. To prevent this please contact us at the applicable number above.