



**Authorization to debit a bank account**

Bank: _____	Clearing house code											
Branch: _____	Bank account number						Acct. type		Branch			Bank
Branch address: _____	Institution number						Student's I.D. number					
	0	1	2	7	3							

1. I the undersigned \_\_\_\_\_ Name/s of account holder/s as shown in bank records \_\_\_\_\_ student number

Address: \_\_\_\_\_  
Street No. Town Postcode

hereby instruct you to debit my/our aforementioned account in your branch, for payment of tuition fees additional charges and rent in the amounts and on the dates furnished to you from time to time, on magnetic media or records, by the Technion – Israel Institute of Technology, as specified below under "Details of the authorization".

2. I/we know that:
  - a. This instruction may be cancelled by written notice from me/us to the Bank and to the Technion – Israel Institute of Technology, which will come into force one business day after delivery to the Bank, and also may be cancelled by any provision of law.
  - b. I/we may cancel a particular debit in advance, providing that written notice of such cancellation is delivered to the Bank at least one business day before the debit date.
  - c. I/we may cancel a debit no more than ninety days from the debit date, if I/we can prove to the Bank that the said debit does not match any dates or amounts that may be specified in the authorization.
3. I/we know that I/we must arrange completion of the details in this authorization with the beneficiary.
4. I/we know that the amounts to be debited under this authorization will appear on the bank statements and that no further special notice will be sent by the Bank for these debits.
5. The Bank will follow the written instructions in this authorization so long as the status of the account permits, and so long as there is no legal or other reason preventing it from doing so.
6. The Bank may release me/us from the arrangement specified in this authorization, if it has reasonable grounds, and will inform me/us immediately after taking this decision, indicating the reason.
7. Please confirm receipt of these instructions from me/us to the Technion – Israel Institute of Technology, on the attached slip.

**Details of the Authorization**

The amounts and dates of the debits shall be determined from time to time by the Technion – Israel Institute of Technology, on the basis of (principles for determination): tuition fees additional charges and rent as in force during the period of studies.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature/s of account holder/s

**Bank Confirmation**

To:  
Technion – Israel Institute of Technology  
Student Accounts Department  
Haifa 32000

Clearing house code											
Bank account number						Acct. type		Branch			Bank
Institution number						Student's I.D. number					
0	1	2	7	3							

We have received instructions from \_\_\_\_\_ to honor debits for the amounts and on the dates shown on the magnetic media or records you submit to us from time to time, bearing the number of his/her/their bank account, all as specified in the Authorization. We have noted the instructions and shall act accordingly, as long as the status of the account so permits, so long as there is no legal or other reason preventing us from doing so, so long as we have not received written notice of cancellation from the account holder/s or so long as the account holder/s is/are not released from the arrangement. This confirmation will not affect your obligations towards us, according to the indemnification document signed by you.

Yours sincerely,

Student name: \_\_\_\_\_

Bank: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Branch: \_\_\_\_\_

Signature and branch stamp