



Bank Account Setup

Information needed for signers

Return this form with a copy of your driver's license to GSU's finance department via email (finance@gsutah.org) or in person.

Full Legal Name: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Email: _____

Social Security Number: _____

Primary Phone Number: _____

Employer: _____

Employer Since: _____

Job Title: _____

Primary ID Verification (Required)

Driver's License Number: _____

State: _____ Issued: ___/___/___ Expiration: ___/___/___

Secondary ID Verification (Required)

ID Type (Check One):

Credit Card Debit Card

ID Issuer (i.e. American Express, America First CU, Wells Fargo, etc.):

ID Subtype:

Visa Mastercard American Express Other: _____

Expiration: ___/___/___

ATTACH A COPY OF DRIVER'S LICENSE