

NAME:			8	Student ID:			
COURSE:							
		ACCOUNT	NO.:				
		SORT C	ODE:	- [-	
BUILDING SOCIETY REF. NUMBER (If Applicable)							
NAME OF ACCOUNT HOLDER							
NAME & ADDRESS OF BANK/BUILDING SOCIETY TO AFFECT:							
				FE Bursary Payments Childcare Fund Payments Hardship Fund Payments EMA Payments			
SIGNATURE				DATE			
Please return this form to Student Services, Moray College, Moray Street, ELGIN. IV30 1JJ OR Email to Student.Services.moray@uhi.ac.uk this must be sent from your student email account or it will not be accepted.							
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