

Change of Bank Account Information

Please fill out electronically, then print, sign and mail to:

American Programs
FULBRIGHT-KOMMISSION
Oranienburger Str. 13-14
10178 Berlin

1) GRANTEE'S NAME _____

2) GRANT CATEGORY : Student/ Teaching Assistant/ Professor/ Journalist

3) NEW BANK ACCOUNT INFORMATION

Please note: Due to the new terms and conditions for banks (as of October 31, 2009) the Fulbright Commission **cannot accept any handwritten account information**. If money transfers to wrong accounts have been made based on incorrect information provided on this form, there is no entitlement for a second transfer.

Name and City of Bank _____

Account Holder _____

Account Number _____

BLZ (Bankleitzahl) _____

Date opened _____

4) I plan to close my German bank account on __ __ ____ (dd/mm/year)

Signature

Date

Please leave this space blank!

Programm und Jahr: _____

Sachlich richtig, Datum: _____

Betrag: _____

Konto-Nr. / Buchungsjahr: _____

Vermerke: _____