## DuGood Rewards®

## Debit Cards with Scholarship Rewards



## Scholarship Rewards Points Redemption

Date	Brancn		Employee	
Student Name			Student Acct #	
Student Address				
City, State, ZIP	Name of College			
Student Phone #	Student Email Address			
Will adult(s) also be redee	eming points for Scho	olarship Rewards?	□ Yes □ No	
Adult Name:		_ Account #		
Adult Name:	Name:		_ Account #	
I understand that I must sent directly to the schoo the credit union to redeer	l or institution of my	choice or deposited	to my account. By signi	
I wish to receive funds by	v: ☐ Direct Deposit	Account Number: _		_Suffix
	☐ Check	Payable to:		
Student Signature	Date		Contact Phone Number	
Adult Signature	Date		Contact Phone Number	
Adult Signature	Date		Contact Phone Number	
For Accounting Depa	rtment Use Only			
Student Card Number:		# of Points:		
Adult Card Number:		# of Points:		
Adult Card Number:		# of Points:		
Total Number of Points	s Redeemed for Sc	holarship Reward	s:	
Total Dollar Amount of	Points Redeemed	: \$		
Direct Deposit Posted - Account Number:		Suffix		
Check - Payable to:		Check Number:	Check Date:	
Date Points Removed From	Card(s)Studer		Adult	Adult
Redemption Complete:				
DuGood Rewards Redemption I	9	presentative Signature	Revised April 201	.9