

University of Delaware's Center for Economic Education and Entrepreneurship

How to Open a "Bank at School" Account

Artisans' Bank will open its Bank at School at David E. Robinson Elementary School on Thursday, September 19, 2024.

Be \$mart and \$ave!

- Students in grades **1-5** will have the opportunity to open a non-custodial, FDIC insured, school savings account earning **0.25%** interest (APY). The account will be set up in the child's name alone; parents/guardians will not be able to solely withdraw these funds.
- These accounts are provided to the Bank at School children free of charge.
- The Artisans' Bank at **David E. Robinson Elementary School** will operate every **Thursday** from **8:30 a.m.** to **8:50 a.m.**
- The Bank at School branch is for **deposits only**. Deposits will be processed at the **Dover** office of Artisans' Bank.
- Withdrawals may be made at any bank branch of Artisans' Bank. (Upon opening your account, you will be mailed a list of our bank branches and banking hours along with the required savings account disclosures).
- Students who have existing Artisans' Bank accounts can deposit into their existing accounts at the Bank at School.
- Students, with parent/guardian permission, may apply to use the Artisans' Bank Online Banking service to check their account balance online.
- To open a Bank at School account, please complete and return the attached <u>Account</u> <u>Opening Application / Permission Form</u> with a minimum \$1.00 opening deposit.
 Please return the form in the enclosed envelope with your child's name printed on it.
- Teachers and Artisans' Bank representatives can assist the students with filling out the deposit forms, if required.

Thank you for your interest in the Bank at School program!



Bank At School Account Opening Permission

David E. Robinson Elementary_School <u>Please print clearly</u>

To open a non-custodial account, each student must provide the following information:

•	Student's Full Name			
•	Street Address			
•	City State Zip code			
•	Phone number			
•	Birth Date Month Day Year			
•	Student's Social Security Number			
	Parent's signature			
	Teacher's nameGrade			
	f you choose to allow your student to open an Artisans' Bank savings account, please complete this permission lip and return it to the School for their records.			
	School/Bank Use Only Account #			

ARTISANS' BANK AT SCHOOL PROGRAM

Artisans' Bank is offering David E. Robinson Elementary School students the opportunity to open a non-custodial school savings account. Each Bank at School account is free of service charges, as long as the account is kept active. Bank at School accounts may be legally maintained until a child's 18th birthday, at which time the account will automatically transfer to a regular statement savings account.

The Bank at School program accepts deposits only. Withdrawals and other account activity may be made at any bank branch of Artisans' Bank. To open a Bank at School savings account, the following information and a \$1.00 minimum deposit is required.

Student's Full Name:			
Date of Birth: Daytime Phone Number:			
Street Address:			
City:	State:	Zip:	
Student's Signature or Printed Name	e		
Parent/Guardian: Do you want your ch	nild to have Internet access to	to their account? Yes No	
If yes, please provide an e-ma	il address		
For Students Aged 16+: A Governmen	nt issued Photo ID is required	red: (Drivers License; US Passport; State Issued ID Card)	
Fed/State Issuing ID:	ID #:_	#:	
ID Issue Date:		Expiration Date:	
IRS Backup Withholding Certification (If not a "U.S. Person," please certify foreign status separately.) Student's SSN: Taxpayer I.D. Number (SSN) – I certify that the SSN shown above is my child's correct taxpayer identification number. Backup Withholding – I certify that I am <u>not</u> subject to backup withholding (either because I have not been notified that I am subject to backup withholding as a result of a failure to report previous interest or dividends or the Internal Revenue Service has notified me that I am no longer subject to backup withholding). Exempt Recipients – I am a tax-exempt recipient as certified under the Internal Revenue Service Regulations. I certify under penalties of perjury that the statements checked in this section are correct and that my child is a U.S. person (includes a U.S. resident alien). Parent/Guardian's Signature Signature Date			
Parent/Guardian Permission to Open a Bank at School account. Please check the appropriate box and sign as confirmation. Yes, I want my child to participate in the BANK AT SCHOOL program. No, I do not want my child to participate in the BANK AT SCHOOL program. Parent/Guardian's Signature Parent/Guardian's Name – Please Print Parent/Guardian's Contact Daytime Phone Number (These are non-custodial accounts: The Parent/Guardians will not have sole access to the funds in the Bank at School account.)			
Rev. October 18, 2021		Opening Deposit Amount \$	