



HARTWICK
est. 1797

REFUND REQUEST
OFFICE OF STUDENT ACCOUNTS
HARTWICK COLLEGE

I HAVE BEEN NOTIFIED THAT THERE IS A CREDIT BALANCE ON MY STUDENT ACCOUNT.

_____ I REQUEST A REFUND OF THE FULL CREDIT BALANCE UNLESS OTHERWISE NOTED HERE. \$_____

Refunds will be made payable to the party whose funds created the credit, whether by payment or loan, unless otherwise specified below. Refunds from PLUS loans require parental permission to be disbursed to the student.

STUDENT NAME: _____ ID: _____

BORROWER NAME (if different): _____

SIGNATURE

DATE

Disbursement of Check:

Please make check out to (check one): Student Borrower

Distribution of check (check one:) Campus Mailbox # Mailed Home

If mailed and different from billing address, please provide new address here:

For Office Use only

Reg Status: _____ Housing: RB / OC \$ _____ / C Title IV on File: Y / N
TAP: Y / N TPP: Y / N - PIF: Y / N PLUS loan Parent _____