



REFUND REQUEST

Name
and
Address

Purpose: This form is used to request payment by check of all refunds indicated by Policy FN08 except tuition refunds and refunds covered by other University policies.

Instructions: This form must be completed and attached to a Special Request for Check for further processing. See Refund Request instruction page on GURU website for details.

Reason for Request:

Depart. Reference #	Department Number	Fund Number	Object Code	Project Number	Amount

TOTAL _____

On behalf of the department indicated below, I request that a check be issued as noted.

Name _____ Signature _____ Date _____

Title _____ Department _____

Check is to be:

 Mailed

 Held