

Student Financial Services

Refund Request Form

Student name:		Amount requested:
ID number:		\$
Date:		Reason for request:
Phone number:		
Email address:		

Initial I understand that my attendance in class will need to be verified before any financial aid will be processed. Failure to verify attendance, and the resulting loss of aid, may lead to an outstanding balance being owed to the university.

Initial Refunds normally require 1 to 2 weeks for approval and processing **once credit is available on the account.**

Initial This Refund Request Form is effective for this transaction only. A separate form is required for each request.

Initial All refunds will be processed through ACH (electronic transfer), to the student's bank account. If you have not set up your refund bank information, please go to "Student Finances" on myLynn at <http://my.lynn.edu> to complete your ACH setup.

By signing this, I confirm that I have completed the ACH setup and have read the disclaimers above.

Student signature: _____

If student is under 24* years of age, a parent signature is required for any request exceeding \$100.

*Federal Department of Education regulations state that students that are a graduate student, married, veteran, orphan of the court or have children of their own are considered independent of their parents. All others are considered dependent until the age of 24.

Parent name (please print)

Parent signature

Office use only	
ACH setup: Y / N	Amount of refund: \$ _____
Supervisor approval: _____	Date: _____