

BUTLER UNIVERSITY

STUDENT ACCOUNT REFUND REQUEST

NOTE: If federal (Title IV) financial aid funds create a credit balance on your account, this form is not required to receive a refund check.

BU ID Include the first 9 digits only

Name (please print) _____

Refund Request is for:

____ Fall term ____ Spring term ____ Summer I term ____ Summer II term

Leave amount blank
to receive maximum refund available

AMOUNT REQUESTED .

I would like to PICK UP _____ my refund check

I would like you to MAIL _____ my refund check to: _____
(Use HOME or LOCAL address in my.butler.edu) _____

Note:

- **Refund Requests** marked "MAIL" will be sent to address designated above. If no address is designated or if "MAIL" or "PICK UP" is not designated, refund checks will be mailed to the home address on file.
- All refund checks will be issued in student's name unless credit balance is created by a federal parent PLUS loan
- If the credit balance remaining on your student account is not due to Title IV funds, only two checks will be issued per term. **Any time there is a credit on the account due to Title IV funds, that credit will be refunded in its entirety.**

Student Signature _____ Date submitted _____

For office use only

Date form received: _____