***Lancer Cash Refund Request Form***

**Student Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ L Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Refund (check one):**

Graduation  Withdrawal from the University  Separation from the University

**Refund Information**

Refunds will be processed for Lancer Cash balances over $5 and are subject to a 10% administrative fee, not to exceed $25. All University debts must be satisfied before a refund can be processed. Refunds are mailed by check and to your permanent address on file with the University, so please confirm your address is correct before submitting this request. Refund processing typically takes 4-6 weeks.

**Authorization & Signature**

I hereby request a refund of my remaining Lancer Cash balance and authorize Lancer Card Services to close my account. I acknowledge that an administrative fee will be deducted and that my refund will be processed according to the above information.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

*For office use only:*

Account balance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Administrative fee: \_\_\_\_\_\_\_\_\_\_\_\_ Refund total: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of account closure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date refund voucher prepared: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Processed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date sent to Accounts Payable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_