

Name _____

Andrews University ID Number _____


Contact info _____

Signature _____

REASON FOR RELEASE

☐ Graduating/not returning ☐ Last semester/need to register ☐ Not attending ☐ VISA status changed ☐ Other _____

REFUND INSTRUCTIONS – SELECT ONLY ONE

- ☐ Post to my student account –outstanding balance ☐ Refund to credit card used on _____
- ☐ Direct deposit to **US** checking/savings (complete Refund Profile in [TouchNet](#)) ☐ Wire transfer (Contact office for instructions, fees may apply)
- ☐ Process refund check (Fill out refund check details below . Mailing to addresses outside US is not recommended.)

REFUND CHECK:

► PAYABLE TO: ☐ Myself ☐ Other: _____

► ☐ Pick Up ☐ Mail: _____

Office Use Only

Approved by/date _____ Registration Central _____ Refund Amount \$ _____ Processed by/date _____

Paid on _____ Last term enrolled _____ Number of credits _____ Deposit payer permission _____

Notes: