



**REQUEST FOR REFUND CHECK ADVANCE**

**PART I: TO BE COMPLETED BY STUDENT**

Date: \_\_\_\_\_ Student ID Number: \_\_\_\_\_ Campus: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_ Address Line 2: \_\_\_\_\_

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

Tel 1: \_\_\_\_\_ Tel 2: \_\_\_\_\_ Email: \_\_\_\_\_

**PART II: STUDENT CERTIFICATION**

Reason for Request: \_\_\_\_\_  Additional Supporting Documentation Attached

I understand that Long Island University is lending me \$ \_\_, \_\_ \_\_ as an advance on anticipated future disbursements due to me for tuition, fees, room, board, and/or other educational expenses. When those disbursements are issued, they will be used to repay this loan.

However, the amount of expected disbursements is based on the number of credits for which I am currently enrolled as of the date indicated on this form. **I understand that if I drop or withdraw from any courses after receiving this advance, the amount of disbursements due to me may decline, in which case I will owe the University the difference between the amount indicated on this form, and the amount of the disbursements I actually receive.** In that event, the University will present me with a bill indicating the amount I owe, and I will be required to repay the University within thirty (30) days. Should I default in making repayment to the University, I understand that Long Island University may refer my account to an outside collection agency or law firm. Should this occur, I will be responsible for the payment of my remaining balance as well as the fees of any collection agency or law firm, which may be based on a percentage at a maximum of 40% of the debt, and all costs and expenses, including reasonable attorneys' fees that the University may incur in such collection efforts.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART III: TO BE COMPLETED BY LONG ISLAND UNIVERSITY**

Amount: \_\_\_\_\_ Term: \_\_\_\_\_ Campus Approval: \_\_\_\_\_

Check #: \_\_\_\_\_ Date: \_\_\_\_\_ University Center Approval: \_\_\_\_\_