REFUND APPLICATION

Student Name __________________________________________________________
Last, First, Middle Initial

Student ID Number ___________________________ Contact Phone Number ___________________________

BW Term ___________________________

Select One: MAIL _____ (To Address on Student Account) DIRECT DEPOSIT* _____

*If selecting Direct Deposit, you must FIRST set up Electronic Refunds online through the Payment Portal by visiting www.bw.edu/pay and selecting the “View Your Billing Statement” option under Current Students. Log-in using your BW credentials. Once in the Payment Portal, under My Profile Setup on the right, select “Electronic Refunds” and follow the instructions. If an electronic refund account is provided, your refund will default to direct deposit.

STATEMENT: To the best of my knowledge, all charges and fees due to the University have been paid in full. I understand that changes or adjustments may occur to my student account. I may still owe the University and this may occur after I have received the refund as requested above. I also understand that all adjustments will appear on my student account statement and that if any valid adjustment creates an amount due to the University, subsequent to this refund, it is expected to be paid by the due date of that statement. I also understand that, in requesting a refund, I will receive the entire credit on my student account at the time of processing.

I certify that I have read, understand, and agree with the above statement.

Student Signature _____________________________________________ Date ___________________________

PARENTS/GUARDIANS: The above named student is my dependent or ward. I certify that I have read the above Statement and understand its contents. I understand that if the University releases this Credit Balance, even if created through the proceeds of a Federal Parent PLUS Loan, the refund will be made payable to the above named student for his/her use.

Please issue the refund as requested.

Parent/Guardian Signature _____________________________ Date ___________________________

NOTE: You will receive 2 emails from the Cashier’s Office, one indicating that we have received your refund form and a second when it has been completed.