FOR OFFICE USE ONLY: REFUND
Refund Check:
Cashier's Check:
Money Order:
Receipt Emailed: Y/NA

JAG#:_____

2023 – 2024 Request to Return Loan Funds

Student Name:_____

check to this form. If yo to submit a cashier's ch	ou have cashed neck or money	l your refund check order made payable	or received a refund versity of S	ng, please attach the origina via direct deposit, you will n South Alabama for the amou	ieed unt
you wish to return to yo term for which the		_	ill not be processed	l after the last day of th	<u>e</u>
Semester (circle):	Fall 2023 Spring 202		g 2024	Summer 2024	
Check the appropriate	box(es) pertai	ning to your request	t and circle the fund(s) you want to return:	
I want to return Subsid		nt of my: Unsubsidized	Parent PLUS	Graduate PLUS	
I want to returr Subsidi	_	ny: Unsubsidized	Parent PLUS	Graduate PLUS	
Amount to retu	rn: \$	(whole dol	lar amounts only)		
_	s form. Allov			nail to the address indic	
I understand that I will covered by these loans.	l be responsibl <i>NOTE: Loan</i>	e for any tuition, fee returns must be m	es or other charges tha ade in whole dollar a	ed adjustment to my loan(s at may have previously beer mounts. If your return requ you will be billed for the	n
Student Signature		_	Date		
Parent/ Parent PLUS Loan Bor (required for Parent PLUS Loan			Date		

TYPED SIGNATURES WILL NOT BE ACCEPTED.