

# Wheaton College

## Refund Request Form

Office of Student Financial Services  
Phone: (800) 541-3639 (508) 286-8232  
Fax: (508) 286-3787

**Please Complete the Following** (Please Print Clearly):

\_\_\_\_\_ Student I.D. Number  
Full Name of Student (Last Name, First)

\_\_\_\_\_ Name of Second Party if check is to be jointly payable (e.g. study abroad program, or parent if parent loan funds)

*Check will be mailed to the address provided below.*

\_\_\_\_\_ Street

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

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Phone

**\*Requested Refund Amount: \$** \_\_\_\_\_

Reason for Refund: (Please check all that apply)

Overpayment  Study Abroad- Location: \_\_\_\_\_  
 Leave of Absence or Withdrawal  Other \_\_\_\_\_

If your account is being paid through the TMS monthly payment plan, no refund will be given until payment is received from TMS for the term. Refunds will not be processed based on anticipated credits. If you have anticipated financial aid, awards or loans, your refund will be processed upon receipt of those funds.

**Please allow 7 to 11 days for processing your refund. Thank you.**

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

**Office Use Only** Official WD/LOA Date: \_\_\_\_\_ Refund Percentage: \_\_\_\_\_ Inst ProRata

**\* All adjustments to term charges and financial aid must be completed prior to refund approval.**  
**\* PLUS loan refunds must be sent to parent unless written instructions to do otherwise exist in student file.**

Bal Fwd _____	Wheaton Grant _____	Merit Schol. _____
Tuition _____	Pell Grant _____	Gilbert Grant _____
SAF _____	SEOG Grant _____	Mass. NIL _____
Room _____	State Schol. _____	PLUS _____
Meal _____	Perkins Loan _____	Other _____
Phone _____	Sub Stafford _____	PAYMENTS _____
Other _____	UnSub Stafford _____	

Term: \_\_\_\_\_ Approved Refund Amount: \_\_\_\_\_

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

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

\*Students with Financial Aid must have a signature from a Financial Aid Counselor.