A refund/financial aid check, #____________, in the amount of $_______________ was mailed to me on ______________.

I affirm that:

☐ As of this date, I have not received the check.
☐ The check was received by me and was subsequently lost, misplaced or destroyed.
☐ The check is now stale dated/void (check attached)

Please place a stop payment on this check. I realize that this process can take up to 15 business days and that if I subsequently receive or recover the original check it will not be negotiable and must be returned to SVC 1039. I understand that if for any reason the original check is cashed after receiving a replacement check or after the funds have been disbursed into my bank account that my University records will be placed on HOLD and I will be responsible for repayment of the amount of the original check. I would like for:

☐ the check to be applied to my account to pay for charges/fees/tuition. (NOTE: If the University is owed money from a current or past term all or part of the check will be applied to your student account.)

☐ a replacement check be mailed to me. I understand that the check will be mailed to my local mailing address on OASIS and it is my responsibility to make sure the address is correct. (If you have an active eDeposit account you will not get a check)

☐ the funds be deposited into my checking account (You need to have signed up for eDeposit on OASIS).

☐ I be given a copy of the front and back of the check if the bank shows that it has been cashed or paid.

CONTACT INFORMATION-Please complete

USF ID #: ______________________________________________________

Name: _____________________________________________________________

Phone: ______________________ e-mail:_______________________________

Signature: ______________________ Date: ______________________

Bring the completed form to SVC 1039. It can also be emailed, faxed or mailed to the address below:

University Controller’s Office: REFUNDS
University of South Florida ♦ 4202 East Fowler Ave, ALN147 ♦ Tampa, FL 33620-5800
Email: sfsrefunds@usf.edu ♦ FAX: 813-974-3618 ♦ Inquiries: 813-974-6053

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