

**WILLIAM CAREY UNIVERSITY
REFUND ACKNOWLEDGEMENT**

I am enrolled in _____ semester hours and attending William Carey University for the _____ term. I affirm that I have applied for Financial Aid and am thereby entitled to receive this refund, CHECK # _____

AMOUNT \$ _____, which represents an excess of funds after tuition and fees have been paid.

PLEASE READ CAREFULLY AND INITIAL BELOW

By cashing the above refund check I affirm that I fully intend to remain in school for the entire term listed above. If unforeseen circumstances make it necessary for me to withdraw from school, I understand **that the university may be required to return some or all of the above refund to a lender or government agency.**

Should I request to withdraw, I **promise I will reimburse William Carey University for all funds the university is required to return to any agency and/or any financial aid scholarships that may be reduced.** *Initial* _____

This the _____ day of _____, 2010

Student Signature

Printed Name

Student ID Number

Witnessed By:
