# Security Deposit Mail Request Form

Date: _____

To: University Bursar

From: University Housing Department

Re: Refund Check

**Select what qualifies you for a refund:**
__Over 60 credits hours
__Living off campus
__Withdrawing
__ Not Returning
__Graduating

**Where did you last live on campus?**
Apartment # _____Building_____ Room_____
Residence Hall_____ Room#____

## I understand that:

I am voluntarily submitting this request and I am aware that some charges could be deducted from my deposit. I am also aware that the check refund process takes 30 days and will be mailed. Please submit deposit to the address below.

Name: _____Student Account/ID#_____
Mailing Address: _____
_____
Student Contact#:_____
Student Signature: _____

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