HARVARD MEDICAL SCHOOL FINANCIAL AID OFFICE

Refund/Cash Advance Request Form

This form may be used to request a refund or cash advance if: 1) your termbill shows a credit balance; 2) your termbill is expected to show a credit balance when you sign your loans at Holyoke Center; 3) you have endorsed over to your termbill a check for an outside scholarship or loan that, when credited to your termbill will result in a credit balance, or 4) you are expecting a credit from an outside funding source such as HST or HHMI.

Name:	Date:		
Harvard ID #:	Year of Graduation:		
Email Address:			
I am requesting a: (Check One)	Cash Advance for the amount of: \$ \$1,000 or \$2,000		
(Check One)	Refund for the amount of: \$		
	(Write Balance for Full Credit)		

**Cash Advancement is one month's housing expenses based on either a 11-month or 12-month student budget. The maximum advance of funds for is \$1,000 for students living in Vanderbilt Hall or \$2,000 for students living off campus. Please note: 3rd and 4th year students may request up to two months of living expenses (for July and/or August). Please submit this request in June to receive the funds by July 1st.

Method of payment: Direct deposit Paper check

NEW! Your refund can now be direct deposited into your U.S. bank account! In order to use this option, you must first enroll by logging into your student bill and choosing DIRECT DEPOSIT. This information is located at http://isites.harvard.edu/icb/icb.do?keyword=k69147

If you wish to receive a paper check please enter your address here:

PLEASE NOTE:

- You must sign your promissory notes be fore loan proce eds can be credited to your student termbill statement.
- We transmit requests one a week. You will be notified via email that a check has been requested and you should expect the check to arrive in 3-5 business days from the date of notification.
- You should never accept a refund check for an amount that is larger than you expect.
 When a disbursement check is drawn from your termbill account, it creates a charge or debit on your account. You are responsible for paying any charges on your termbill that are not covered by financial aid.
- You understand that you are responsible for the repayment of any funds disbursed through errors identified at a later date by either party.
- REFUNDS WILL NO LONGER BE AVAILABLE FOR PICKUP AT THE STUDENT RECEVIABLES OFFICE.

By submitting this form you are electronically signing it and agreeing to all terms on the form.

Outstanding Termbill Charges:	\$	Current/Pending Termbill Credits: \$
Processing Date:	Refund Batch Number:_	Amount of Refund/Advance: \$