

BUSINESS OFFICE OVERAGE FORM

If a student's financial aid creates a credit balance on their account, we are required to get written permission from the student if you wish for your refund to be retained for a future semester.

Please sign the authorization below and return to the business office.

I authorize the credit balance overage to be retained until:

FALL **SPRING** **SUMMER**

Student Name (print) _____

Student Signature _____

Thank you for your assistance in this matter.

Shawndell Miller
Business Office (615-277-7436)