

# Cal Poly Humboldt.

## Request for Refund

Student Financial Services SBS 285 | 707-826-6789

Refunds will be processed within 21 days of the submission date and processed back to the original form of payment (credit card, direct deposit, or check).

Name: \_\_\_\_\_ Humboldt ID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I request a refund of fees paid for: \_\_\_\_\_

Reason for request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*By signing below, I understand that debts owed to the University may be withheld from any refund due to me. Refunds will be issued to the original payment method if possible or refunded via direct deposit through the Student Center. If neither forms of refund are applicable, a check will be mailed to the address listed above.*

Requester's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit the completed form one of the following ways:**

**In Person to  
the Cashier's Office  
SBS 285**

**By Email to  
CASH@humboldt.edu**

**By Mail to  
1 Harpst Street  
Arcata, CA 95521**

### For SFS Office Use Only

Refund Amount: \_\_\_\_\_

Credit Adjustment:

Needs an ADJ Posted to  
Student Account

(Include student account screenshot  
or original transaction)

Transaction moved  
to NST-REFUND

(Include transaction screenshot)  
250004-ZM002

NST Online Payment

(Include original  
transaction screenshot)

SFS ADJ Date: \_\_\_\_\_ (include screenshot)

SFS Initials: \_\_\_\_\_

SFS Notes: \_\_\_\_\_

Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_