

# Camel Cash Refund Request

CONNECTICUT COLLEGE

Camel Card Office

Name on Camel Card Account: \_\_\_\_\_ Camel Card Number: \_\_\_\_\_

Name of Requester: \_\_\_\_\_ Relationship to Account Holder: \_\_\_\_\_

Mailing Address on Record with Connecticut College:  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Please check one of the following reasons for your refund request:

- Graduating from Connecticut College as of \_\_\_\_\_  
Graduation Date
- Withdrawing from Connecticut College as of \_\_\_\_\_  
Withdrawal Date
- No longer employed by Connecticut College as of \_\_\_\_\_  
Separation Date
- None of the above; however, I am requesting a refund in the amount of \$ \_\_\_\_\_

Refunds are by check only and will be mailed to the official address on record with the College.  
Accounts with less than a \$1 balance or have been inactive for one year or more are not entitled to a refund.

*My signature certifies that I am entitled to request a refund from the Camel Cash account listed above.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Return this form to:

Camel Card Office  
Connecticut College  
270 Mohegan Ave  
New London, CT 06320

Fax: 860-439-2125  
Email: camelcard@conncoll.edu

Updated: 05/12/2015

### For Office Use Only

Camel Cash Balance: \_\_\_\_\_ Date Request Received: \_\_\_\_\_

Amount of Refund: \_\_\_\_\_ Refund Authorized By: \_\_\_\_\_