

California State University Fresno

MISCELLANEOUS FEES REFUND APPLICATION

ALL REFUNDS WILL BE SUBJECT TO A \$5.00 ADMINISTRATIVE FEE

REFER TO REFUND POLICY IN THE CLASS SCHEDULE

DATE _____

LAST NAME, FIRST M.I. _____

FRESNO STATE I.D. NUMBER _____

MAILING ADDRESS _____

() _____

PHONE NUMBER

CITY STATE ZIP CODE _____

SPECIFY TERM:

- Fall _____
- Spring _____
- Summer _____

STUDENT SIGNATURE _____

- Admission Application Fee
- Administrative Error
- Diploma Fee: Regular/Post Bac (Circle)
- Dog Days Orientation Fee
- Health Fees /Pharmacy (Circle)

- Library: Fines/Books Student/Other
- Parking: Permit/Decal
- Parking Fines: Overpayment
- Transcripts: Regular/CGE (Circle)
- Other _____
Description

Reason for request:

=====DEPARTMENT APPROVAL ONLY=====

Amount Paid \$ _____
 Cashnet Receipt# _____
 Cashnet Receipt Date _____
 Collection Sheet# _____

Refund Amount \$ _____
 Department Approval _____

CHARTFIELD DISTRIBUTION

ACCOUNT	FUND	ORG ID	PROGRAM	SUB CLASS

=====ACCOUNTING SERVICES ONLY=====

\$5.00 Administrative Fee _____

 Signature, Accounting Technician

Refund Amount \$ _____
 Refund Check Number _____
 Refund Check Date _____
 EFT Date _____