University of Wisconsin Whitewater | Financial Services

REFUND CHECK STOP PAYMENT REQUEST

The purpose of this form is to request the stop payment on a refund check that has been lost, destroyed, or never received and has not been paid.

Instructions:

1. Refund check stop payment requests are accepted 14 days after the check issue date. Forms are processed within 3-5 business days and any remaining refund, after further eligible charges are paid, will generally be received 10-14 business days after processing.
2. To prevent further refund delays, you are strongly encouraged to set up direct deposit via your WINS account. For instructions on direct deposit setup, visit www.uww.edu/adminaffairs/finance/sfs/refunds.
3. If a student refund check, this form must be completed, signed, and submitted by the student, and if emailed, sent from the student's campus email. If a Parent Plus Loan refund check, this form should be completed, signed, and submitted by the check payee.
4. Return this completed form to the Student Financial Services Office.
   Email: cashiers@uww.edu
   Mailing Address: Cashier's Office, PO Box 88, Whitewater WI 53190
   In Person: Cashier's Office window; 104 Hyer Hall (use drop box if after office hours)

Student Information

Student ID #: _____ First and Last Name: _____

Mailing Address: _____
Number and Street Address *City* *State* *ZIP*

Email: _____ Phone: _____

Check Information

Issue Date: _____ Check #: _____ Check Amount: _____

Check Payable To: _____

The refund check has been: ☐ Lost ☐ Destroyed ☐ Never Received ☐ Other: _____

Payee Declaration

I am the lawful Payee of the UW-Whitewater check referred to above.
In consideration of issuing repayment by the University, I, the undersigned, hereby agree to all the following:

- I declare the original check described above has been mislaid, and I request the University issue a repayment in lieu of the original check described above.
- I certify the check information referenced on this form was issued and delivered, and has not been received, cashed, transferred, deposited, or endorsed by me or anyone authorized to act on my behalf.
- I agree that if the original check described is recovered by me or anyone authorized to act on my behalf, I will promptly return it directly to the Student Financial Services Office without endorsing it or in any way attempting to receive payment on it.
- I agree to defend, hold harmless and indemnify the University and the Board of Regents of the University of Wisconsin System and all successors and assigns from and against any and all claims or demands of whatever nature related in any way to the original check described above, and from all damages, losses, costs, and expenses – including, but not limited to, attorney's fees to the extent allowed by law – which the University may sustain, incur, or be liable for in consequence of having issued a substitute check in lieu of the original described above.
- I agree that the University may charge my student account directly to recover any damages, losses, costs, or expenses described above.

If eligible for a reissued refund, check one refund delivery option below, and verify direct deposit or mailing address confirmation is completed.

☐ Direct Deposit (student refund) - I have set up, or updated, my direct deposit (e-refunding) profile via WINS.
☐ Paper Check (student refund) - I have verified, and if inaccurate, updated my mailing address in WINS.
☐ Paper Check (Parent PLUS loan refund) – I have provided my complete current mailing address below.

_____
Number and Street Address *City* *State* *ZIP*

Signature: _____ **Date**: _____