



Southeastern
Baptist Theological Seminary

Refund Request Form

By completing the following form, you are requesting that a credit balance on your student account be refunded to you via direct deposit. Prior to completing this form, please first consult Self-Service to ensure that the student account reports a credit in the "Balance Due" section. A credit balance is indicated by parentheses.

Please Note: Any credit from anticipated financial aid cannot be issued as a refund until all awards have been received and student eligibility has been verified by the Office of Financial Aid. Additionally, credit balances must be first applied towards decreasing the balance of an active payment plan.

Only one refund request is allowed per semester.

Student Name: _____
Student ID Number: _____
Date of Request: _____
Telephone Number: _____
Amount Requested: _____

How can I sign up for eRefunds?

- Use this link to open the Payment Center.
- Select Electronic Refunds.
- Follow the instructions on your screen.

Mailing Address: _____

Student Signature

Please return completed form to the Accounting Services Office either in person, through mail, or by email. Our email address is accountingservices@sebts.edu. Also, please allow up to one week from the date you submit your form for the request to be processed and an additional 7-10 business days for refund to be processed.

Accounting Services Office Use Only

Approved By: _____ Date: _____ Address Changed: _____
Current Balance: _____
Final Balance: _____ Refund Amount: _____

Southeastern Baptist Theological Seminary
Accounting Services
120 S Wingate Street
Wake Forest, NC 27587