

## REQUEST TO CLOSE CARDINAL CASH ACCOUNT

I authorize Student Financial Services to close my Cardinal Cash Account. In accordance with the terms and conditions any refunds will be applied to other amounts owed the University. I understand there will be a processing fee of the lesser of \$10.00 or the account balance.

**NAME:** Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**HOME ADDRESS:** Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

STUDENT BSU ID # \_\_\_\_\_ Amount \_\_\_\_\_

STUDENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Fold

Return completed form to:

Fold

Ball State University  
Office of Bursar and Loan Administration  
Muncie IN 47306-0725