Refund Authorization Form

I hereby authorize the student indicated below to request and receive a refund from their tuition account. The credit in the account is the result of a loan and/or payment plan for which I am the borrower/bill payer, as indicated below.

Note that this authorization to release funds to the student listed below remains in effect for the duration of the student’s Northeastern University career.

I understand that I may, at any time, amend or withdraw this authorization to release future funds by notifying the Office of Student Accounts in writing at studentaccounts@neu.edu.

<table>
<thead>
<tr>
<th>Date Completed</th>
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</thead>
<tbody>
<tr>
<td>Borrower/Bill Payer – Please print</td>
</tr>
<tr>
<td>Borrower/Bill Payer Signature</td>
</tr>
<tr>
<td>Student Name</td>
</tr>
<tr>
<td>Student NU ID #</td>
</tr>
</tbody>
</table>

For Office Use Only:

<table>
<thead>
<tr>
<th>Processed By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Processed</td>
</tr>
<tr>
<td>CRR in Queue/Date</td>
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<tr>
<td>CRR Processed</td>
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<tr>
<td>Additional Comment</td>
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</tbody>
</table>