University of West Georgia
STUDENT-Wolf Bucks Refund Request
University Community Center- Auxiliary Services
1601 Maple Street, Carrollton, GA 30118
Telephone: 678-839-6525

SECTION 1: INFORMATION

Student ID #: ________________________________

Name: ____________________________________ Submission Date: ___________

Address of Requester: ___________________________________________________________________

Email: ________________________________ Phone Number: ________________________________

SECTION 2: REFUND INFORMATION

Refund Pre-Requisites

a. There is a processing fee of $10 when the Wolf Bucks refund is submitted

b. If you are a student, you must have

i. Withdrawn or Graduated from the University of West Georgia

Refund Methodology

Refunds will be disbursed via BankMobile

Office Use Only:

Date Processed: ________________ Initials: _____ Refund Amount: ________________