



Student Refund and Scholarship Reissue Request

Student Information

Name: _____ Student ID: _____

Phone Number: _____ Date: _____

Check Information

Check number (begins with 76): _____

Dated: _____

Amount: _____

Reason for Reissue: Lost ☐ Stolen ☐ Other ☐ _____

Before the check can be reissued, please verify:

- ☐ I have verified that my mailing address listed on my MyPalomar account is correct and includes all information including any apartment or unit numbers if applicable.

Agreement

By signing, I am stating that I am the legal owner of the check issued by Palomar College through the County of San Diego. I agree that the check was not endorsed and has not been paid. The check was lost, destroyed, or mutilated before the check was paid by the County of San Diego and Palomar College. Should a duplicate check be issued and cashed or deposited, I agree to repay the County of San Diego the amount of the duplicate check plus interest and reasonable collection expense.

I certify under penalty of perjury that the foregoing is true and correct.

Signature: _____ Date: _____