

## Franklin University Switzerland Return of Funds Authorization Form

Student Name:			
University. In the even expenses for your child	t that the amount of your load d to use throughout the seme	nas been recently disbursed to Franklin n was calculated to include incidental ester, we kindly ask you to choose one of oan endorsed either to you or to your	
☐ Direct wire transfe	r to your account in the U.S.		
Name of Account F	lolder:		
Address of Accoun	t Holder:		
Account number: _			
Bank name:			
Bank Address:			
Routing or ABA nur	nber (Domestic):		
Amount to be sent	by wire transfer:		
Parent Signature: _		Date:	
☐ Issue a US dollar c	☐ Issue a US dollar check payable to you and sent to your home address		
Amount to be sent	by check:		
Parent Signature:		Date:	
Diagon water the bar	fa to the a Danie and a Office to		

Please return this form to the Bursar's Office by scanned email attachment to: bursar@fus.edu