

Office of Revenue, Receivable, and Cashiering Services

Cash Only Hold Appeal Form

PANTHER ID:

This form serves as an appeal for a Cash/Credit Only Hold to be removed from my account. I understand that this hold was placed on my account due to two or more returned payments. I would like to appeal this decision. I understand that incomplete and inaccurate information will delay processing.

Instructions:

1. All students must read, complete, and sign this form
2. Return this form to: **Office of Revenue, Receivable, and Cashiering Services**
University Cashier window (any campus)
OR
Email: returns@gsu.edu
3. You will be contacted by email within 2-3 business days confirming an approval or denial.

This appeal is for: FALL

SPRING

SUMMER

LAST NAME

FIRST NAME

MI

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

GSU EMAIL ADDRESS

Have you submitted a previous appeal at GSU?

Reason(s) for this appeal:

Student's Signature

Date

Your typed or handwritten signature is sufficient for a student signature.

Date of most recent returned payment: _____ **Office Use Only:**

Approved	Denied	Comments
Approver Signature		Date