



# Request for Reimbursement 2026-2027

Return completed and signed form to:  
Email: [financialaid@grayson.edu](mailto:financialaid@grayson.edu)  
Fax: 903.463.3908  
Grayson College Office of Financial Aid  
6101 Grayson Dr. Denison, TX 75020

\* = Required field

## Student Information

Student Name\*: \_\_\_\_\_ Email\*: \_\_\_\_\_

Student ID\* \_\_\_\_\_ Phone Number\*: \_\_\_\_\_

Date of Birth (m/d/yyyy)\* \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

## Student Address

Street Address\*: \_\_\_\_\_

City, State, and Zip Code\* \_\_\_\_\_

## Reimbursement Request

**Note: you must submit a copy of original receipts**

Please reimburse my out-of-pocket expenses for:

Term of reimbursement: \_\_\_\_\_

Amount of reimbursement: \$ \_\_\_\_\_

## Release of Funds Request

**Note: You must provide us with a confirmation of release or a letter from foundation/donor**

Please release funds to student from:

Name of scholarship: \_\_\_\_\_

Term for funds release: \_\_\_\_\_

Amount of funds release: \$ \_\_\_\_\_

## Transfer of Funds Request

Please transfer remaining balance(s) from non-Grayson scholarship(s) to another institution or return funds to foundation.

Name of Institution, Foundation, or Donor: \_\_\_\_\_

Student ID at New Institution if applicable: \_\_\_\_\_

Attn: \_\_\_\_\_

Street Address of transfer destination: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Signatures

Student Printed Name\*: \_\_\_\_\_

Student Signature\*  \_\_\_\_\_ Date (mm/dd/yyyy)\* \_\_\_\_\_

## Statement of Non-Discrimination/Equal Opportunity Policy

With respect to the admission and education of students; with respect to the availability of student loans, grants, scholarships, and job opportunities; with respect to the employment and promotion of teaching and non-teaching personnel; and with respect to the student and faculty activities conducted on the premises owned or occupied by the College, Grayson College shall not discriminate either in favor of or against any person on account of race, creed, color, gender, national origin, age, religion, or disability. GC does not discriminate on the basis of sex in the educational programs or activities it operates. Inquiries concerning the application of Title IX and its implementing regulations may be referred to the Title IX Coordinator or to the Office of Civil Rights. The Title IX Coordinator is the Director of Title IX and Student Conduct. 6101 Grayson Drive, Denison, Texas 75020, 903.415.2614

### Office Use Only

Fund Codes	Amount	Action
		<input type="checkbox"/> Transfer <input type="checkbox"/> Reimburse
		<input type="checkbox"/> Transfer <input type="checkbox"/> Reimburse

Notes:

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_