



OFFICE OF THE CONTROLLER
Student Tuition and Billing Services
SU80/Room 130
 777 Glades Road
 Boca Raton, FL 33431
 tel: 561.297.3120
 www.fau.edu

DUPLICATE CHECK REQUEST FORM

Please enter or print all information below:

I, _____, ID Number (Z#) _____,

request that a duplicate check be issued for the following reason (s):

_____ I never received the original check. _____ The original check was destroyed or lost.

OTHER REASON: _____

ORIGINAL CHECK AMOUNT _____

I hereby authenticate that the information provided is accurate. Additionally, if I do receive or find the original check I will not cash the check but immediately return the check to the Controller’s Office, Student Tuition and Billing Services, SU80/Room 130.

In the event that I do cash or deposit both the original and replacement checks, I understand that the Controller’s Office will post the amount onto my student financial account, refer my account to a collection agency, which will send my student account to the three (3) major credit bureaus.

Please place a check mark in the following:

I confirmed that my current address is updated on my FAU student account.
 To review go to www.fau.edu. Select MyFAU Login under Current Students tab. Select Self-Service then Personal Information. Click on update Address and Phone information.

I confirmed that I have setup direct deposit on my FAU student account.
 To sign up go to www.fau.edu. Select MyFAU Login under Current Students tab. Select Self-Service then Direct Deposit to add or update information.

Signature _____ Date _____

Phone Number _____ E-Mail _____

Please complete and submit by one of the following:

Mail: Florida Atlantic University
 Tuition & Billing Service SU 80/130
 777 Glades Road
 Boca Raton, FL 33431

Scan/e-mail: webcontroller@fau.edu

Fax: 561-297-0683

FOR OFFICE USE ONLY: REISSUE FROM UNCLAIMED PROPERTY ACCOUNT

APPROVE:

DENY:

DATE: