



Kentucky Wesleyan College
Voluntary Hold of Credit Balance

I, _____, authorize Kentucky Wesleyan
Please Print Parent Borrower Name

College to hold the credit balance on _____ account from
Please Print Student Name

this semester _____ to the following semester _____. I further
acknowledge that I have signed this form voluntarily and of my own accord.

Parent Borrower Signature: _____ Date: _____

Cashier's Office Representative: _____ Date: _____