

Soldiers and Sailors Civil Relief Act Request Form

1)	I am a member of the U.S. Armed forces and I have been called to active duty as of
2)	I have provided the Cashiers Office with a copy of my active duty orders.
3)	I was not on active duty when I enrolled at UMKC and incurred this debt
4)	My active duty deployment is scheduled to end on and I understand it is my responsibility to contact the UMKC Cashiers Office should my deployment be extended past this date
5)	I agree to contact the UMKC Cashiers Office within 180 days of my active duty deployment ending to set up a formal repayment agreement on my unpaid balance.
6)	I understand that this request only pertains to the assessment of finance charges and late fees on my UMKC account. I am responsible to complete any other withdrawal or petition actions with the appropriate UMKC Office.
	ning below, I attest that I am eligible for the Soldiers and Sailors Civil Relief Act and agree to all the nents above.
Name	Date
UMKC I	ID or SSN
Please	return completed form along with copy of active duty orders to the UMKC Cashiers Office.
Email:	cashiers@umkc.edu

In person: 5115 Oak Street Room 112 Kansas City, MO

Mail: UMKC Cashiers Office, 5100 Rockhill Rd., Room 112, Kansas City, MO 64110