



CHECK REQUEST

The date you want a check to reach you should not be earlier than thirty (30) days prior to the beginning date of the session in which the money is to be used. **Checks are normally mailed ten (10) days in advance of the requested date to your permanent home address.** The check will be made payable to you and must be personally endorsed. If not properly endorsed, the check will be returned unpaid to you by our bank.

Complete all numbered items: (Please Print)

- 1. Account number: _____
- 2. Full legal name (first, middle, last, suffix): _____
- 3. Permanent home address: _____

 City State ZIP
- 4. Name of College or University: _____
- 5. E-Mail Address: _____
- 6. Personal phone number at college: () / _____
- 7. Amount of check: \$ _____
- 8. Date check is needed: Month ____ Day ____ Year ____

I acknowledge the amount requested will be used only for the educational expenses listed on my student loan application to the Fund and that I will be enrolled for the number of classroom instructional credit hours listed on my approval letter.

_____ Date

_____ Signature

Mail to: Pickett & Hatcher Educational Fund, Inc.
P.O. Box 8169
Columbus, GA 31908-8169

FAX to: (706) 324-6788

E-Mail to: info@phef.org

Questions? Call: 800-864-8308 or 706-327-6586