

# REFUND REQUEST

Original Copies of the Bank Slip must accompany this form

DATE:		EMAIL ADDRESS	
STUDENT NAME:		PHONE NUMBER/S	W:
			M:
STUDENT ID		ADDRESS	
NAME OF PROGRAMME:		TUITION PAID:	
DATE SEMESTER COMMENCED			
<b>COURSES ENROLLED IN FOR THE SEMESTER</b>			
1.		3.	
2.		4.	
<b>REASONS FOR THE REFUND</b>			
<b>FOR OFFICE USE ONLY</b>			
REFUND REQUEST RECEIVED ON:		20_____	
REFUND REQUEST IS APPROVED ( )		DENIED ( )	
REFUND DUE DATE ( )		REASON FOR DENIAL (write on the line below)	
COMMENTS:			
REFUND AMOUNT: \$ _____		CHEQUE #: _____	
COLLECTED BY _____		on _____ 2012	
ACCOUNT MANAGER _____		DATE _____	