REFUND REQUEST FORM FOR DOMESTIC STUDENTS

PERSONAL DETAILS (all fields must be completed)

Student Name ____________________________________________   ID Number __________________
E-mail ___________________________________________________  Phone ___________________

Reason for Refund request ____________________________________________________________

___________________________________________________________________________________

Amount of Refund request (subject to confirmation by Student Finance Staff) ______________________

I declare that the information provided on this form is true and correct. I also declare that the refund recipient's details provided on this form are correct and that the refund recipient is the genuine and appropriate person who should receive this refund.

Student Signature _________________________________________   Date _____________________

Receipt of Refund Request Form
Staff Signature _____________________________________________ Date _____________________

Please select one of the following refund options.

[  ] DIRECT CREDIT – Bank account number

Please supply verification of your bank account, such as

• A deposit slip
• A letter from the bank
• Or a screenshot of bank account details (showing bank, account holders name and bank account number)

[  ] OTHER – Please specify how and reason why

___________________________________________________________________________________

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Student Finance Use Only

Checked by _____________________________________ Date __________________

Comments ________________________________________________________________