

Course Withdrawal/Refund Request Form

Section A : Withdrawal Request

Name:	Student ID No:
Contact No:	Email Address:
Course Title and Intake:	Date of last attendance:
Reason(s) for Withdrawal <i>(Attach relevant supporting documents if applicable):</i>	

Section B : Refund Request

Request for Refund: ☐ Yes ☐ No		
Mode of Refund:	Amount: (\$)	Details:
☐ Bank Transfer		Bank:
☐ PAYNOW		Account No:
☐ Cheque		Contact No:
☐ Cash		Account No:
☐ I declare that the information given is true and accurate.		
Signature of Student/Student's parent/legal guardian / Date: _____ <i>(signed by Student's parent/legal guardian if student is under eighteen (18) years of age)</i>		

Section C : Counselling

Remarks:

Section E : Review and Approval on Refund Request			
Refund Calculation:			
Item(s)	Amount Paid (\$)	Refund %	Amount Refundable (\$)
Total			

Recommendation on Refund Request:		☐ Yes	☐ No
Comments:	Verified by:		
	_____ (Name / Designation / Signature/ Date)		
Approval on Refund Request:		☐ Approved	☐ Rejected
Comments:	Approved by:		
	_____ (Name / Designation / Signature/ Date)		