

Refund Request Form

Submit the completed form via email to meboli@coquitlamcollege.com with the subject line "Refund Request Form".

Read the *Tuition, Other Fees, and Refunds Policy* under <u>Coquitlam College policies</u> prior to applying for a refund. Refund requests must be received by the Office of the Registrar at least ten days before the last working day of the month. If received after this date, cheques will be issued on the last working day of the following month.

Do NOT send a duplicate request as this will delay the processing time.

STUDENT INFORMATION		N	0. 1	
Legal Last Name (Family Name)	Legal First Name (Give	en Name)	Student #	
CONTACT INFORMATION				
Street Address				
City		Province/State		Postal Code
Email Address		Telephone Number		
REFUND TYPE				
☐ Tuition Fees ☐ Book Deposit ☐ Other:				
REASON FOR REFUND				
☐ Study permit was refused ☐ Course withdrawal ☐ Program completed / Graduated ☐ Overpayment of fees				Overpayment of fees
☐ Transferring to another institution ☐ Other (explain):				
REFUND DELIVERY METHOD				
Please note if the payment is made by debit/credit card, it will be refunded back to the original card.				
☐ Pick Up (Vancouver Campus)				
An email will be sent to your provided email address when the cheque is available for pick-up. Please ensure your contact details are correct.				
☐ Mail to Provided Address Above Your cheque will be mailed to the address you provided above in the form. Please ensure your contact details are correct				
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OFFICE USE ONLY				
Accounting Department Approval				
Accounting Signature		Date (yyyy/mm/dd)		