

Refund Request - International

To request a refund the following fields must be fully completed

Student Information (as it appears in y	our passport)
First	
Last	<u> </u>
Date of Birth (DD/MM/YY)	
UNBC Student Number:	
If you applied through an agent what i	s the name of the Agency:
Reason for Refund Request (select one	e):
☐ Study Permit Refused ■ Required Document: Copy of (official refusal letter
□ Change of school (School must be a Required Document: Letter of Required Document: Copy of	Acceptance from DLI School
☐ Other ■ Please specify:	
application permits the University of Northern British	ve submitted in this Application for Refund is correct and true. I understand that completion of this signed in Columbia to request and/or confirm any information necessary to support my Application for Refund; that result in the immediate and final rejection of the Application for Refund from the University of Northern British bound by UNBC refund policies and procedures.
complies with the BC Freedom of Information and Pr addition to internal administrative uses related to storesearch and planning. Certain student information is	dvised that the use of information provided on this form, and other information placed in a student record, rotection of Privacy Act, and with the policies and procedures of the University of Northern British Columbia. In udent admission, registration and status, student information may also be used in strict confidence in University s provided on a confidential basis to Partner Institutions, to Statistics Canada as governed by the Canada Statistic tudent records and the obligatory reporting of student data to external bodies, respect the absolute
I have read and understand the statements contained	d in the "Declaration" and "Information Release Statement" sections above.
Signature of Applicant	 Date
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Please submit this form and all required documents in one email to international refunds @unbc.ca.

For the International Deposit refund policy and information visit the **UNBC** website.

Student Refund Request

Student #



Finance Department

3333 University Way, Prince George, BC V2N 4Z9 Phone: 250-960-5510 Fax: 250-960-5794 Email: finance@unbc.ca Web: unbc.ca/finance

Last Name				First N	ame			
Current Address				City/To	wn			
Province				Country	у			
Postal Code				Refund reques	d amount sted \$			
Direct dep	Existing			Cheque	e by Mail	Financial Aid		
Reason for Refund								
Signature								
Please return completed forms to: UNBC Finance by email from your UNBC email account, or by mail or fax (contact information at top right of form) ** No refunds will be processed between the first day of classes and the add/drop date** PLEASE ALLOW TWO TO THREE WEEKS FOR PROCESSING								
This section to be completed by UNBC Finance Department								
Requested by: Student Sponsor Registrar's Office Financial Aid								
Verifications: T2 clear Sierra clear TDFR						_ GXADIRD		
Description						Amount		
Total Amount to be Refunded:						\$		
Authorization S	Signature				Date ente	ered		
Keyed by					Documen	nt #		
Direct	deposit	Chec	que by Ma	il		Wel	O Visa Mastercard Interac Amex or Discovery EPBC	

Date