

## **Refund Request Questionnaire**

Studen	t Name: _		Student ID:
Term/Ir	ntake:		
Payment Details			
1.	Name of the person or entity who made the initial payment to KPU:		
2.	Who made the initial payment for your (student's) fees to KPU?		
	0	Self (the student)	
	0	Parent/Guardian	
	0	Sponsor	
	0	Agent	tionship):
3.	Is the original payer aware that a refund request has been submitted?		
	0	Yes	
	0	No	
4.	credit car	rd statement with unrelated tr	cuments? (The student must provide proof of payment, such as a ransactions redacted. The statement should clearly show the date, nal payment, along with the bank's name and the account holder's
	Ó	Yes	
	0	No	
Self-At	testation S	Statement	
I,		[Paver Name	hereby self-attest that all the information provided in this form, along
with the	attached	proof of payment, is accurate	and that the submitted credit card statement is a true copy. The
statement reflects a payment of \$			[Amount] made on[Date] towards
the fees	s of		[Student Name] at Kwantlen Polytechnic University (KPU).
Sign of:	ro:		
Signatu	ıc		

By signing this form, I confirm that the information provided is truthful and complete.