

REFUND OF SECURITY DEPOSIT FORM

Kindly complete the form using CAPITAL letters.

Name: _____ Academic Year: _____ Block/Floor: _____ Room Number: _____

Student ID #: _____ E-mail Address: _____

Mailing Address: _____

Kindly tick the option which indicates your preference for refund:

Transfer to Student A/c Transfer to Bank A/c Collect from Bursary

If transferring to Bank A/c kindly provide the following information:

Bank Name & Address: _____

_____ Intermediary Bank: _____

Transit Number: _____ Sort Code/ABA Number: _____

Bank A/c Number: _____ SWIFT CODE: _____

Signature: _____ Date: _____

**NB. THERE IS A CHARGE FOR ALL WIRE TRANSFERS WHICH WILL BE DEDUCTED FROM THE DEPOSIT
AND YOU MUST INCLUDE THE SWIFT CODE.**

FOR HALLS OF RESIDENCE USE ONLY

Deductions Made: Yes No Specify: _____

Signature: _____ Comments: _____

FOR BURSARY USE ONLY

Outstanding Fees: Yes No Specify: _____

Refund Granted: Yes No Amount Refunded: _____

Signature: _____ Comments: _____