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Curtin University
Malaysia

FORM 3-E Refund Application Form

Please complete all the required fields & submit to CASHIER'S OFFICE at Counter 8 in person to ensure that your refund will be processed on time. For Student Housing refund, you should contact Student Housing Department.

Student Name : _____ Student ID : _____

Contact No : _____ Nationality : _____

Course : _____ E-Mail Address : _____

I wish to request refund for (please tick one box):

☐ Course Fee Overpayment for Semester _____ Year _____

☐ Personal Bond & Hospitalization Deposit (International Students only)

☐ Others (Please specify) _____

Reason for requesting refund: _____

Requested mode of refund (please tick one box):

☐ Direct Bank In (Below RM50,000 and for Malaysian bank accounts) ☐ Telegraphic Transfer (TT) in _____ (foreign currency) ☐ Cheque (above RM50,000)

* (1) Please complete the details below. Kindly ensure that the Payee Name and IC/Passport Number are as exactly stated in your Bank Account. If any of this information is wrong, then the refund will be rejected by the University's Bank. In this case, not only your refund will be delayed but a service charge of RM10 shall also be imposed for a replacement.
(2) If you chose Telegraphic Transfer (TT), the cost of bank charges for TT shall be borne by you. Foreign currency TT shall be translated by the University's bank at the prevailing exchange rate on the day of transaction. Refund process for TT will takes 21 working days, 7 working days longer than other payment mode.

☐ Payee Name
Student's Name
(As stated in Bank Account)

OR

☐ Payee Name
Father's / Mother's
Name (As stated in Bank Account)

Payee IC No
(For Malaysian student) **OR**
Payee Passport No.
(For Non-Malaysian student)

Bank Account No

Bank Name : _____
Bank Address : _____
Bank Swift Code : _____ *(For International TT only)*
Bank IBAN No. : _____ *(For TT to Pakistan, Europe, UK & Middle East only)*
BSB Code : _____ *(For TT to Australia only)*
CNAPS Code : _____ *(For TT to China only)*

Signature : _____ Name: _____ Date : _____

(By signing, I have acknowledged that the information given herewith is correct and that I understand the terms and conditions stated in this form)

For further enquiries, please contact the Cashier's Office, Grd. Flr, Building Heron 1 at 085-630021 or email to finance@curtin.edu.my

Office Use Checklist:

Items	Completed	Remarks
Student Details	Yes / No	
Payment Mode	Yes / No	
Payee Name	Yes / No	
Bank Details	Yes / No	
Document check	Yes / No	☐ Passport copy ☐ Authorization Letter

Date Received:

Received from email:

Received By:

Name: