



International Visa Students - Academic Program



International Education Services

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REASON FOR REFUND/DEFERRAL

I request a refund, less applicable fees.

For the following reason(s):

STUDENT INFORMATION

LAST NAME	FIRST NAME	DATE OF BIRTH (MM/DD/YYYY)
		/ /
ENROLMENT PERIOD (AS CONFIRMED ON THE LETTER OF ACCEPTANCE)	SCHOOL ASSIGNED/ATTENDING	

PARENT INFORMATION

PARENT LAST NAME	PARENT FIRST NAME	
STREET ADDRESS		CITY
PROVINCE	POSTAL CODE	COUNTRY
PRIMARY TELEPHONE NUMBER (INCLUDE AREA CODE)	EMAIL ADDRESS	

REFUND PAYABLE (PAYMENT WILL BE ISSUED TO THE PERSON NAMED BELOW)

LAST NAME	FIRST NAME	RELATIONSHIP TO STUDENT
STREET ADDRESS		CITY
PROVINCE	POSTAL CODE	COUNTRY
PRIMARY TELEPHONE NUMBER (INCLUDE AREA CODE)	EMAIL ADDRESS	

PARENT DECLARATION: I declare that all the information provided in this application is complete, correct and to the best of my knowledge. I confirm that the tuition payment for this student was paid by me. In the case of a refund, I authorize that the eligible refund is to be paid to the person/company indicated herein.

PRINT (PARENT LAST / FIRST NAME)	PARENT SIGNATURE	DATE

Refunds payable within Canada will be processed by: cheque if under \$10,000 and mailed to the address indicated above; EFT (Electronic Fund Transfer) if over \$10,000. Complete the EFT Authorization Form and return it with a VOID cheque and this form.
Refunds payable outside of Canada will be made by wire transfer. Complete the CIBC Wire Cable Form and return with this form (do not modify - it must remain as a Word document).

ADMISSIONS VERIFICATION

ADMISSIONS VERIFICATION	DATE RECEIVED