

International Student Program

Refund Request Form – EUROPE & SOUTH AMERICA

We do not accept handwritten forms.

Today's Date (MM-DD-YYYY): _____

Date of Withdrawal (MM-DD-YYYY): _____

OFFICE USE ONLY

ISP Student Number:

STUDENT INFORMATION

Legal Last Name: _____ Legal First Name: _____

Birthdate (MM-DD-YYYY): _____ Current BSD School: _____

Student's Email: _____

PARENT INFORMATION

Legal Last Name: _____ Legal First Name: _____

Email: _____ Phone number: _____ Relationship to student: _____

PAYMENT INFORMATION – Please complete **ONE** payment method below (Example: EFT/Direct Deposit or Wire Transfer)

PAYMENT MADE THROUGH FLYWIRE – REFUND WILL BE DONE THROUGH FLYWIRE TO ORIGINAL PAYER.

BY EFT/DIRECT DEPOSIT - FOR BANKS IN CANADA ONLY (Bank charges apply)

DIRECT DEPOSIT PAYABLE TO:

Account Holder Legal Last Name: _____ Account Holder Legal First Name: _____

Account Holder Email: _____ Relationship to student: _____

Account Holder Address: _____

Account Holder City: _____ Province _____ Postal Code: _____

Bank Name: _____

Bank Full Address: _____

Bank City: _____ Province _____ Postal Code: _____

Branch Transit Number

Institution Number

Account Number

NOTE: Burnaby School District Finance Department requires a copy of the Account Holder's Direct Deposit Form in order to process an EFT.

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BY WIRE TRANSFER IN CAD CURRENCY ONLY - FOR OVERSEAS BANKS – CONFIRM BANK WILL ACCEPT CAD CURRENCY (bank charges apply)

WIRE TRANSFER PAYABLE TO:

Beneficiary Legal Last Name: _____ Beneficiary Legal First Name: _____

Beneficiary Email: _____ Relationship to student: _____

Beneficiary Address: _____

Beneficiary City: _____ Province _____ Postal Code: _____

Bank Name: _____

Bank Full Address: _____

Bank City: _____ Province _____ Postal Code: _____

SWIFT Code (All countries) – The swift code consists of 8 or 11 characters.

IBAN Number (Europe/South America) – The IBAN Number consists of up to 32 alphanumeric characters.

- **I have confirmed with my financial institution that the above banking details are accurate.**
- **I understand that a refund will only be issued if all required forms and documents are fully completed, signed, and submitted for processing within the time period indicated on our Refund Policy.**
- **I am aware that it will take four to six weeks to process the refund, or longer if any required documents are missing or information is incomplete.**

Parent's Written Signature: _____ Date: _____

Please submit this form with all required documents to International Office at
InternationalRefund@burnabyschools.ca.

OFFICE USE ONLY

Program Coordinator Approval: _____ Approval Date: _____

Total Refund Amount: _____

The following have been notified:

Secondary: VP-Intl + SISOP + ISA + Medical + Langara Homestay

Emailed By: _____ Date: _____

Elementary: Principal + Secretary + Medical + Elementary Placement

Emailed By: _____ Date: _____

INTERNATIONAL EDUCATION OFFICE USE ONLY