

Request for Refund – Continuing Education

A	PROGRAM/COURSE	
Student Name:		
Student Number:		
Start Date:		
Withdrawal Date:		
B	Reason for Refund (Please check box below)	
	% refund	Within Policy
	100%	Selkirk College cancelled course – H2S Alive
	100%	Withdrawal 4 or more days prior to course start date
		Overpayment/Duplicate payment
		Requires an adjustment, SRS Programming
	50%	Withdrawal 1-3 days prior to course start date
	0%	Withdrawal after program start date
Continuing Education Admissions Officer/Cashier:		Date:
C	TUITION AMOUNT:	
	ADJUSTMENT AMOUNT:	
	REFUND AMOUNT:	
	Castlegar Cashier:	Date:
D		
	Refund to be mailed to student – address confirmed	
	Refund to be mailed to Sponsor – cheque requisition attached	

E Detach this portion and include with refund cheque.

Refund for Continuing Education Course		
	Full refund	\$
	Partial refund	\$