



**GEORGIA  
CENTRAL UNIVERSITY**

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## TUITION REFUND REQUEST

**Dear Applicant,**

To formally withdraw, a student should Dates and Signed Tuition Refund Request form and must submitted to the Office of Business Affairs by scheduled time (shown on the refund policy) to be entitled for any refunds. Not attending classes does NOT constitute a formal withdrawal. Students will receive refunds for overpayment and/or withdrawal from classes or school (Class Drop Form or School Withdrawal Form must be attached). Students will not receive refunds on late fee charges, any administrative charges, any scholarships, late payment fees, application fee, I-20 fee, and penalty for non payment or Installment payment fees.

*International students studying on university-sponsored F-1 visas are ineligible for a complete refund. Students submitting written notification of the intent to withdraw, during or prior to the first week of class, will receive refund stated by the refund policy.*

*\*All refunds are issued within 30 days of the date of withdrawal; however, if overseas delivery required, actual delivery may take several days beyond this 30 day period.*

### Applicant Information

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last (성), First Name

Degree Program: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Number of Street City State Zip Code

*The address MUST be up-to-date for your refund to be mailed appropriately.*

Reason (Maximum of 50 words)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

Received \_\_\_\_\_ GCU Position: \_\_\_\_\_ Date: \_\_\_\_\_

### Student Account Information

Total Credit Available: \$ \_\_\_\_\_ (Student Account Statement Enclosed)

Refund Rate Applied: \_\_\_\_\_ % (Refund Request Date CANNOT be shared)

Refund Amount Due: \$ \_\_\_\_\_

Schedule Date of Refund: \_\_\_\_\_ (mm/dd/yyyy)

### Recorded by the Office of Business Affairs

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_