

AND ADMISSIONS

P.O. Box 5300, 1250 Grand Lake Road, Sydney, NS Canada B1P 6L2

studentaccounts@cbu.ca Tel: 902-563-1330

REFUND REQUEST FORM

Are you an international student?	Yes	No	
STUDENT INFORMATION			
First Name:			_ Middle Name:
Last Name:			_ Student ID:
Date of Birth:			_
Current Address:			

^{*}Please note that international payments must be returned to the country that the payment was received from.