Accommodation Services
Refund Request Form

PLEASE NOTE THAT THE UNIVERSITY ONLY REFUNDS BACK TO THE ORIGINAL CREDIT/DEBIT CARDS, AND BANK ACCOUNTS FROM WHICH THE PAYMENT WAS MADE

However, if the original card/bank account is no longer valid, or if payment was made by a third party and you now wish the refund to be reimbursed to yourself, Sections B and C must both be completed. Please note these refunds will only be made via bank transfer.

Student Name: ............................................................ Student Number: ............................................................
E-mail: ........................................................................ Contact Tel Number: ............................................................
Student Signature: .......................................................... Date: ........................................................................
Reason for Refund: ..............................................................................................................................................

Post Graduate Students: I am deferring to the next Academic year; please hold my application fee until then ☐

Section A – Original Payment by Credit/Debit Card ☐ Refund will be made directly back to the card used originally for payment. If the card is no longer valid please complete Sections B and C

Section B – Original Payment by Bank Transfer, Western Union or Direct Debit ☐
Enter EITHER the UK or International bank details relevant for the refund below:

UK Bank account holders name (Payee Name): ..................................................................................................
Bank Name & Branch for refund: .........................................................................................................................
Sort code .................................. (Six digits) Account number .......................................................... (Eight digits)

International Bank account holders name (Payee Name): ..........................................................................................
Name & Address of Bank for refund: ........................................................................................................................
...........................................................................................................................
Swift or BIC Code ...............................................................................................................................................
Full IBAN or Account number ................................................................................................................................
India only IFSC code ...............................................................................................................................................

If you have any additional bank information such as a routing / intermediate bank details please attach this information to the refund request form
Section C – Original payment method no longer appropriate for refund

Please provide details and attach evidence why we are unable to refund by original payment method.

Original payment made by Third Party (Agent/Sponsor/Parent)

If a third party has paid on your behalf, we will require their written permission to refund you directly. Please attach any supporting documentation as failure to do this will delay your refund.

Supporting Documentation Attached

Section D – Original Payment by Cheque or Cash

Cheque Payable to: ...................................................................................................................................................
Address to send cheque: ...........................................................................................................................................

Please return the completed form to:

Accommodation Services, Newcastle University, King’s Gate level 2, Newcastle upon Tyne, NE1 7RU
Accommodation Finance telephone number: +44 (0) 191 2081971

ACCOMMODATION SERVICES USE ONLY

Service Ticket Number: ...........................................................................................................................
Original Payment Method: ....................................................................................................................... Date of Payment ..........................
Original payment amount: .......................................................................................................................

Comments ..................................................................................................................................................

Charges completed .................................................................................................................................

Amount to refund ..................................................................................................................................

Actioned By: ................................................................. Date: ..................................................

Authorised By: .............................................................. Date: ..................................................

Processed By: .............................................................. Date: ..................................................