Tshwane University
of Technology
We empower people

APPLICATION FOR REFUND - NSFAS FUNDED STUDENTS 2024

STUDENT NUMBER	INITIALS AND SURNAME	DATE REQUESTED

"IF" BANKING DETAILS HAVE CHANGED ENSURE TO UPDATE TO FUNDI WEBSITE IN 3 EASY STEPS (https://mycard.fundi.co.za)	
REASON FOR REFUND:	*Only Registration and or Residence fee to a maximum of R2700 can be considered for a refund*

Tick and complete where applicable:

The deposit were paid by	Myself ☐	Parents ☐	Other Specify ☐	*Relation*

If the payment were paid by yourself, parents or someone else, ensure that the relevant additional signature and contact details are complete on the form.

Contact Number(s) of Student	*STUDENT CONTACT NUMBER*	
Email address of student	*STUDENT EMAIL ADDRESS*	
Signature of Student	*STUDENT SIGNATURE*	
Contact Number of Parent / Other (Full Names & Surname)	*CELL NUMBER*	*NAME AND SURNAME*
Signature of Parent / Other	*SIGNATURE*	*DATE*
Name, Signature and Stamp of Financial Officer **FOR OFFICE USE ONLY**	*NAME & SURNAME FIN AID OFFICIAL*	*FAO STAMP*

NOTES:	PLEASE TAKE DEPOSIT REFUNDS WILL BE RELEASED VIA FUNDI

Only approved NSFAS (DHET) students may apply for a refund.
If you made arrangement to settle previous year debt, or still remain with previous debt , your refund will not be processed.
If your refund were processed and NSFAS rejects your claim afterwards you will be liable for the debt.
Please take note the refund will be paid back to the student, and the student need to refund the applicable member that have made the deposit.
TUT will not be involved to explain to any member.
NSFAS Capped students whereby the full cost is not covered will not qualify for refund.
Please consult with your Financial Aid Officials for clear understanding who are legit to qualify.
ONLY IF YOU HAVE CREDIT BALANCE YOUR REFUND WILL BE PROCESSED (T&C APPLY)
By sigining the below tear off slip you therefore agree and understand the above notes.

CLOSING DATE : 15 NOVEMBER 2024

TEAR OFF SLIPP

STUDENT NUMBER	INITIALS AND SURNAME	DATE SUBMITTED

FINANCIAL AID OFFICIAL NAME AND SURNAME		
NAME AND SURNAME	*SIGNATURE*	**CAMPUS:**
DATE:		