

**UNISA REFUND REQUEST - TO BE COMPLETED BY THE STUDENT****E-MAIL TO:** [finan@unisa.ac.za](mailto:finan@unisa.ac.za)**FAX TO :** 012 – 429 4150**NB:** Refund will be processed within 15 business days from date of receipt of all compulsory documents.STUDENT NUMBER: \_\_\_\_\_  
TITLE & SURNAME:: \_\_\_\_\_

FULL NAMES: \_\_\_\_\_

**CONTACT DETAILS:**CELL NO : \_\_\_\_\_  
OFFICE NO : \_\_\_\_\_  
EMAIL : \_\_\_\_\_**POSTAL ADDRESS:**\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**REFUND AMOUNT REQUESTED:**

R \_\_\_\_\_

**REFUND METHOD:**

- 
- EFT (ELECTRONIC REFUND)**
- Please complete all Bank Account fields below

BRANCH CODE

BANK NAME

ACCOUNT NUMBER

ACCOUNT HOLDER

TYPE OF ACCOUNT

**COMPULSORY DOCUMENTS REQUIRED:**

- 
- COMPLETED AND SIGNED REFUND FORM
- 
- 
- PROOF OF PAYMENT
- 
- 
- CONFIRMATION OF BANKING DETAILS WITH AN OFFICIAL BANK STAMP (NATURAL PERSON/ COMPANY)
- 
- 
- ID COPY OF A NATURAL PERSON / THIRD PARTY

**ADDITIONAL COMPULSORY DOCUMENTS FOR COMPANY OR SPONSOR REFUNDS:**

- 
- COMPANY REGISTRATION NUMBER FOR A COMPANY REFUND
- 
- 
- LETTER FROM A SPONSOR AUTHORISING A REFUND (STATING THE AMOUNT TO BE REFUNDED)

**STUDENT SIGNATURE:****DATE:****FOR OFFICE USE ONLY:**

CAPTURED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

**CONSENT FORM IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT NO 4 OF 2013**

I declare that all the particulars furnished by me on this form are true and correct. I undertake to comply with all the rules, regulations and decisions of the university and any amendments thereto, and I have taken note of advice that may be applicable to students in general. I, as a student registered with Unisa or an applicant intending to study with Unisa, hereby consent that Unisa may collect, use, distribute, process and communicate my personal information for all required academic processes pertaining to my application/registration to study with Unisa, which may include, but is not limited to, internal administrative processing, institutional and scholarly research, funding submissions, processing by the Matriculation Board and Admissions Committees, Higher Education South Africa, the Department of Higher Education and Training, the Council on Higher Education, the South African Qualifications Authority, other public higher education institutions, Qualification Verification Agencies and third parties rendering communication facility on behalf of the university. I understand that in terms of POPI and other laws of the country, there are instances where my express consent is not necessary in order to permit the processing of personal information, which may be related to investigations, litigation or when personal information is publicly available. I will not hold the university responsible for any improper or unauthorised use of personal information that is beyond its reasonable control. I confirm that I have read the notice and understand the contents thereof.

