Refund Authorisation Form

If you are due a refund of an overpayment that has been made to the University and would like to return a payment to a student. Please be aware they must be currently registered on a programme of study.

Please return this form:

**In person**  Student Fees Enquiry and Income Counter
Room G8, B Block, Aston Webb Building

**By post**  Income Processing, Finance Office,
Edgbaston, Birmingham. B15 2TT.

**Payer Details**

Payer Name: ...............................................................

Contact Email: ..........................................................

**Student Details**

Student ID Number: ..............................................

Student Name: ..........................................................

**Payment Details**

Payment Category: Accommodation / Tuition*  
* Circle as appropriate

Payment Method(s): Card (Web or Other*) / Direct Debit / Cheque or Draft / Bank Transfer

Other ........................................................................

Please be aware that:
• If your payment was made by card, the refund will be made back to the original card used. If your card has expired we will contact you about this; **do not enter card details on this form**.
• If you paid via Draft, you will be required to submit a copy of the remittance advice to show the original payer.

Date of Payment: ..........................................................

Amount Paid: £ .....................................................

Refund Requested: £ ..................................................

Refund Reason: ..........................................................

**Refund Details**

Account Holder(s): ..........................................................

Address: ........................................................................

Sort Code: .....................................................................

Account Number: ..........................................................

Bank Name: ....................................................................

Bank Address: ....................................................................

**FOR INTERNATIONAL PAYMENTS:**

BIC (SWIFT): .......................................................... (required)

IBAN: ........................................................................

I, the original payer, hereby authorise the refund to be paid into the above account details:

Signature(s) ..............................................................

Date .................................................................