To: Director of the Finance Department

of Rīga Stradiņš University

**PAYMENT REFUND/**

**Tuition fee transfer**

**Application form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **STUDENT INFORMATION** | | | | | |
| **Name, Surname:** |  | | | | |
| **Student card No.:** |  | | **Study programme:** |  | |
| **Study year:** |  | **Semester:** |  | **Group:** |  |
| **E-mail:** | ***@rsu.edu.lv*** | | **Phone No.:** |  | |
| **Address:** |  | | | | |

|  |  |
| --- | --- |
| **INFORMATION FROM THE LIBRARY** *(to be filled out by the Librarian)* | |
| Librarian’s signature, stamp and date certifying that the student has settled his/her obligations towards the Library |  |

|  |  |
| --- | --- |
| **PLEASE REFUND/TRANSFER** *(tick the applicable):* | |
| **the money that has not been used to cover my tuition fee** | withdrawal from the University (termination of studies)  withdrawal from the University prior to the start of studies  overpayment of the tuition fee |
| **the Bond money** *(only upon withdrawing from RSU)* | |
| **Transfer tuition fee to the Open University EUR** | |

|  |  |
| --- | --- |
| **BANK ACCOUNT INFORMATION** | |
| Please refund the money to: | |
| Name, Surname\* |  |
| Account No. (IBAN) |  |
| SWIFT/BIC code |  |
| Bank |  |
| ***\* State also the ID number, if the holder of the account is someone other than you.*** | |

With my signature I guarantee the accuracy of the account number.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature** |  |  | **Date** |  |

Upon completion, please submit or send this form to the **Student Services** in RSU Main building

**Address:** Student Services, 16 Dzirciema Street, Block K, Room 100, Riga, LV-1007, Latvia

|  |  |  |  |
| --- | --- | --- | --- |
| ***Received at RSU Student Services*** |  | ***For office use only:*** | |
|  | **Date received** |  |
| **Signature** |  |
| **Decision** |  |