

## **Refund Application Form**

Please complete this form if you wish to request a refund for services provided by Career Curve

| Personal Information:                   |   |
|---|---|
| 1. Full Name:                           | -   |
| 2. Contact Number:                      | _   |
| 3. Email Address:                       |   |
| 4. Passport :                           | _   |
| 5. Student ID No (Career Curve):        |   |
| Refund Request Details:                 |   |
| 6. Service(s) Provided: (e.g., Applicat | tion Assistance, Test Prep, Counseling, etc.) |
| Service 1:                              |   |
| Service 2:                              |   |
| Service 3:                              |   |
| 7. Date of Enrollment:                  | CADEED  |
| 8. Reason for Refund Request:           |   |
| Refundable amount already depo          | sited CUR Service already received            |
|   |   |
|   |   |
|   |   |

## **Supporting Documents:**

10. Please attach any relevant supporting documents, such as receipts, invoices, or communication with Career Curve.

## Attach documents along with this form

## **Declaration:**

I hereby declare that the information provided in this refund application form is true and accurate to the best of my knowledge. I understand that Career Curve will review my request and may require additional documentation to process the refund.

Applicant's Signature:

Date: