



# 華仁中文學校

## Chinese Heritage School of New Jersey

P. O. Box 127 Monmouth Junction, NJ 08852 www.chsnj2000.org

### Tuition Refund Request Form

*(Refund Policy: No refund after the 3<sup>rd</sup> week of each semester)*

Student Name: \_\_\_\_\_ Class: \_\_\_\_\_ SID#: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Refund Requested: \$ \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Refund: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Refund Check Payable to: \_\_\_\_\_

Parent's Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### *For School Use Only:*

Approved by: \_\_\_\_\_ Title: \_\_\_\_\_

\_\_\_\_\_ Title: \_\_\_\_\_

Date approved: \_\_\_\_\_

Check #: \_\_\_\_\_

Amount Paid: \_\_\_\_\_