

Tuition Fee Refund Request

Please note:

1. Fill in the form digitally – you do not have to print this document
2. Save and name the document "Refund Request Form - Your_Name"
3. Return the completed form to 'tuitionfees@mau.se' together with relevant supporting documentation

Applicant's name

Personal code numer (yymmddxxxx)

Email address

Programme/courses

Amount requested for refund (SEK)

Reason for requesting refund

Bank account details (must be the same account from which the tuition fee was paid)

Account holder's name

Account holder's address

Bank name

IBAN or Swedish account number

Date and place

I certify that the information provided is true and correct

For International Relations Officer at Malmö University

Request for refund is granted according to local regulation

Date _____

Name _____

Signature _____