

NATIONAL TAIWAN UNIVERSITY

Student Fee Refund Authorization Application

1. Basic Information (To ensure that the refund is directly remitted into your account, please check to ensure that you have filled in the form correctly)

Select all that apply: Overseas Chinese Student Mainland Chinese Student International Student Deferred Graduation Applied for reduction of or exemption from tuition and miscellaneous charges (local students only)

Applied for student loan (local students only)

Name: _____ Student ID No.: _____ Academic Program/Year of Study: _____

National ID (ARC) No.: _____ Email: _____

Phone (Mobile): _____ Contact Address: _____

2. Reason for Refund: [Note: Refunds for student loan applicants will not be processed until the lending bank remits the funds (near the end of the semester).]

Withdrawal or suspension from the university (please attach a Withdrawal or Suspension Certificate issued by the Office of Academic Affairs) Early graduation (please attach a certificate issued by the Office of Academic Affairs)

Fee reduction Withdrawal from insurance

Duplicate payment or overpayment (please attach the payment receipt)

Dorm withdrawal or transfer (for those who cannot apply for a refund through myNTU)

Other:

3. Refund Method (No remittance fee when using Post Office Bank, Hua Nan Bank, or E. Sun Bank):

I hereby authorize National Taiwan University to remit the refund into the designated account below, and I understand that a remittance fee of NT\$10 will be deducted from the refund amount (no remittance fee will be charged if using Post Office Bank, Hua Nan Bank, or E. Sun Bank).

Beneficiary's Name: _____ Beneficiary's National ID: _____ Relationship with the student:

Reason for authorization: _____ (to be filled in if the beneficiary is not the applicant or their family)

(Post Office Bank) No. _____ Account:

(Commercial Bank): _____ Bank _____ Branch _____ Branch Code
Account: _____ (please fill in from the left)

I agree to the issuance of an **uncrossed cheque** with **myself** as the beneficiary (please attach a separate Application to Cancel Crossed Cheques).

●Student's Signature (please sign personally): _____

-----The above to be filled in by the student-----

4. To the relevant units: After verifying the refund item and amount, please place your official seal:

[Note: For those applying for refund because of a fee reduction or exemption or a student loan (not applying for withdrawal or suspension of studies), the approval unit is the Student Assistance Division, Office of Student Affairs, 3366-2048.]

The approved refund amount is for the _____ semester of Academic Year _____.

Cashier Division Receipt Seal: _____

Office of Academic Affairs Undergraduate Academic Affairs Division 33662388#202-230 Graduate Academic Affairs Division 33662388#402-412 Branch Office of Academic Affairs, College of Medicine 23123456#88021	<input type="checkbox"/> Tuition NT\$ _____	<input type="checkbox"/> Misc. Charges NT\$ _____	<input type="checkbox"/> Credit Fee NT\$ _____	Processing Clerk
	<input type="checkbox"/> Internet NT\$ _____	<input type="checkbox"/> Security & Insurance Fee NT\$ _____	<input type="checkbox"/> Education Credit Fee NT\$ _____	Unit Head
Student Housing Service Division, Office of Student Affairs 33662264 to 33662268	<input type="checkbox"/> Dorm Semester Fee NT\$ _____			Processing Clerk
	<input type="checkbox"/> Summer Dorm Fee NT\$ _____ <input type="checkbox"/> Dorm Internet NT\$ _____ <input type="checkbox"/> Deposit NT\$ _____ (the _____ semester of Academic Year ____)			Unit Head
Health Center, Office of Student Affairs 33662161 <input type="checkbox"/> Undergraduate Health Examination Fee NT\$ _____	Processing Clerk	Foreign Language Teaching & Resource Center 33662896 <input type="checkbox"/> Language Internship NT\$ _____	Processing Clerk	
	Unit Head		Unit Head	
Overseas Student Advising Division, Office of Student Affairs 33663232 Office of International Affairs 33662007	<input type="checkbox"/> Overseas Taiwanese Health Insurance Fee (N0008-1)			Processing Clerk
	<input type="checkbox"/> Overseas Taiwanese and Chinese Group Insurance Fee (N0008-2) <input type="checkbox"/> Chinese Health Insurance Fee (N0008-6) <input type="checkbox"/> International Student Health Insurance Fee (N0008-4) <input type="checkbox"/> International Student Group Insurance Fee (N0008-5) Refunding NT\$ _____ in the _____ semester of Academic Year _____ Refunding NT\$ _____ in the _____ semester of Academic Year _____			Unit Head

Return Slip

Refund application(s) from _____ (name), student ID no. _____ has/have been received.

Please note that if the information provided in the application is correct, the refund will be issued by cheque/remitted to the beneficiary account on _____.

If you have not received the refund after four weeks, please contact the Cashier Division (3366-2016).

Recipient/Received date: