**Request for reimbursement of tuition fees and costs – master programmes**

**Part I: To be filled out by the participant**

**The undersigned, registered as participant at IHS:**

|  |  |
| --- | --- |
| Name: |  |
| Date of Birth: |  |
| IHS applicant number: |  |
| Nationality: |  |
| Master track: |  |

**Herewith confirm that he/she has paid fees and costs for participation in the Master Course on Urban Management and Development as per the following payment dates:**

|  |  |
| --- | --- |
| Date of Payment | Amount paid (in euros): |
|  |  |
|  |  |
| Total amount paid: |  |

**Reason of the request**

|  |
| --- |
|  |

**The participant requests IHS to take the action**\_\_\_\_\_\_\_\_\_\_(Please fill in your answer):

1. Keep the amount paid and allocate them for participation of the student in the next intake of Master programme Urban Management and Development
2. Request reimbursement of all the fees and costs received by IHS to the following bank account:

|  |  |
| --- | --- |
| Bank account number: \* |  |
| Name of the account holder: |  |
| Address of the account holder: |  |
| Bank’s Name: |  |
| Bank’s address: |  |
| Swift Code of the bank: |  |
|  |  |

\* *Please note that IHS can only reimburse to the same account and person/organization from which the funds are received.*

|  |  |
| --- | --- |
| Date: |  |
| Signature of the participant |  |

**Part II: To be completed by IHS staff**

|  |  |
| --- | --- |
| Reimbursement | Amount |
|  |  |
|  |  |
| Total amount |  |

|  |  |
| --- | --- |
| Date: |  |
| Signature of the IHS staff |  |