

TRANSPORT FEE REFUND FORM



Journey to a bright future

Name : Date :
 Address :
 Contact Tel Nos : (Res) (Mob)

I hereby request you to kindly refund the fees paid by me for my

Son / Daughter :
 School :
 Student ID : Class & Section :

Vide receipt no Dated as I have decided to discontinue transport service for my son / daughter on account of
 (Please give reason).

I enclose herewith the Receipt(s) in original towards my claim for refund. The refund may please by made through
 Cheque in the name of

I hereby authorize, Mr/ Mrs whose specimen signature is given below to receive the cheque on my behalf.

Thanking you
 Yours faithfully,

Specimen Signature of Mr/Mrs:

 (Signature of Parent)

FOR OFFICIAL USE

Verified By	Recommendation By	Approval Of
School Accountant	School Admin. Officer	Managing Director

Last Attended Date:
 Payment Details – Cheque
 Voucher No: Date
 Bank
 Cheque No: AED

Acknowledgement from Parent / Guardian
