



GEORGIA CHRISTIAN UNIVERSITY

646 Exchange Place Lilburn, GA 30047 Tel:770-279-0507 Fax:770-279-0308
www.gcuniv.edu E-mail:admin@gcuniv.edu

TUITION REFUND REQUEST FORM

Dear applicant:

Tuition may be refunded as scheduled below (Usually fees are not refundable). Not attending classes does NOT constitute a formal withdrawal. Dated and Signed Tuition Refund Request Form must be submitted to the Office of Business Affairs by the scheduled time shown to be entitled to any refunds:

Students will receive refunds for overpayments and/or withdrawal from classes or school (*Class Drop Form or School Withdrawal Form must be attached*). Students will not receive refunds on late fee charges, any administrative charges, any scholarships, late payment fees, application fee, I-20 fee, and penalty for non payment or Installment payment fees. The President may consider refunds on an individual basis where personal emergency or extreme hardship is involved.

** International students studying on university-sponsored F-1 visas are ineligible for a complete refund. Students submitting written notification of the intent to withdraw, during or prior to the first week of class, will receive the full tuition minus a non-negotiable \$500 administrative fee.*

** For domestic students, refunds will be available within 30 working days of withdrawal. For international students, it will take 3 to 4 months to complete the process.*

Applicant Information:

Name * _____ Date of Birth * _____ GCU Student ID# * _____

Department * _____ Phone Number * _____

Address * _____
The address MUST be up-to-date for your refund to be mailed appropriately

Reason (Maximum of 50 words):

Signature: _____ Date: _____

Official Use Only - For Office of Business Affairs Use Only

Received By: _____ GCU Position: _____ Date: _____

Student Account Information:

Total Credit Available: \$ _____ (*Student Account Statement Enclosed*)

Refund Rate Applied: _____% (*Refund Request Date CANNOT be altered*)

Refund Amount Due: \$ _____

Scheduled Date of Refund: _____

Recorded by the Office of Business Affairs:

Name _____ Signature _____ Date * _____