

NORTH IDAHO COLLEGE REFUND REQUEST FORM

Complete this form and mail or fax to:

North Idaho College
Business Office - Student Accounts
1000 W. Garden Ave. Coeur d'alene, ID 83814
Fax: 208-665-2785

You must drop a course or all courses (through the Registrar's Office or your NICOonline account) and/or follow Residence Hall check out procedures before this refund request form can be processed.

Today's Date: Semester Year

ID# Last Name First Name
Address City State Zip Code
Phone # E-mail address:

Reason for refund? Withdrew Personal Other Returned books
 Certificate of Residency (County Waiver) Payment plan over payment

Original payment date: _____

Original payment made by: Cash Check Visa or MC Sponsor Loans

Did you received financial aid? Yes No

What type of financial aid did you receive?: Loans Grants Scholarships

Important reminders!

* **Dropping below 12 credits could jeopardize your financial aid for the current and up coming semester.**

* **The address above will only be used when no address is available.**

* **All refunds will be mailed, no exceptions.**

* **Credit card payments will be refunded back to the credit card with-in 30 days after original payment.**

Date

Student Signature

FOR OFFICE USE ONLY

Business Office Approval Signature

Refund Amount

Voucher #

Refund type: Check VSA/MC