

# REQUEST FOR REFUND

Please return this copy to CPPD and make a second copy for your records.

PLEASE ENSURE YOU COMPLETE ALL DETAILS BELOW:

## REQUEST FOR REFUND – POLICY SUMMARY

This form is for students who would like to request a partial refund due to non-completion of the contracted course. Before completing this form, please read our Refund Policy, which can be found online at [www.cppdlondon.com/refund-policy](http://www.cppdlondon.com/refund-policy).

**Please be aware that, as part of contracting with CPPD, students are obliged to meet the total cost of their chosen course in full. Students are not entitled to a refund and remain liable for all outstanding fees.** In exceptional circumstances, and at their discretion, CPPD may offer a partial refund to students who wish to apply for a refund.

Information provided in this document will be used by CPPD staff - including CPPD's two Senior Tutors, and/or CPPD's Courses Coordinator, Finance Coordinator, the student's tutor, and other relevant third parties if necessary (e.g. a student's supervisor) – to process your request for a refund.

## APPLICATION FOR REFUND

1. Please explain your reason(s) for leaving the course:

2. Please attach some evidence to support your reason above (e.g. if you have a medical reason, then a doctor's letter would be appropriate). Please attach as much evidence as you feel is necessary.

3. Please explain what each piece of evidence is below. Continue on another sheet if necessary.

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## APPLICATION FOR REFUND (cont.)

4. Is there any additional information you would like us to consider in support of your application?  
Please continue on another sheet if necessary.

## YOUR DECLARATION

By signing below, I understand the following:

- You will use the information I have provided to process my claim for a partial refund of unpaid fees.
- I consent to CPPD using the information I have provided to process my claim for a partial refund of unpaid fees.
- You may use other data that I have consented to you holding about me to help process this form (e.g. email/physical address so CPPD can contact you in writing).
- If the information I have supplied here is incorrect or incomplete you may take action against me, including court action.
- I declare that the information I have given on this form is correct and complete.

For further information on how your information is used, how we maintain the security of your information, and your rights to access information we hold on you, please read our Privacy Policy, or contact our Data Protection Officer at [admin@cppd.co.uk](mailto:admin@cppd.co.uk).

Signature:

Date: