



# IVY LEAGUE ASSOCIATES

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## REFUND FORM

NAME:	
CONTACT PHONE NO:	
PAPER REGISTERED:	
RECEIPT NUMBER:	
REASON FOR REFUND:	
AMOUNT REFUNDABLE:	
BANK DETAILS:	
SIGNATURE:	DATE:

## FOR OFFICE USE

CHECKED BY:	
SIGNATURE:	DATE:
APPROVED BY:	
SIGNATURE:	DATE:
<p>CONDITION FOR REFUND/DEFERAL: Generally, no student will be allowed to <u>defer</u> a course, change class or stream after two weekends of registration or attending four lecture sessions unless there is convincing evidence to support the reason(s) for such and all subject to the approval of the Director of Finance &amp; Admin in writing. Regardless of the situation, any approved deferral attracts a charge of N5,000 PER PAPER.</p>	