

## Declaration Letter for Refund Beneficiary's Compliance Information

**Beneficiary's Full Name:** \_\_\_\_\_

**Beneficiary's Complete Address:** (most recent address)

Apartment/Unit No: \_\_\_\_\_ Building Name: \_\_\_\_\_

Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_

Suburb: \_\_\_\_\_ City/Town: \_\_\_\_\_

State/Province: \_\_\_\_\_ ZIP/Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

Beneficiary's Date of Birth: \_\_\_\_\_

Beneficiary's Place of Birth: \_\_\_\_\_

Beneficiary's Nationality: \_\_\_\_\_

Beneficiary's Father's Full Name: \_\_\_\_\_

Beneficiary's CNIC: \_\_\_\_\_

Beneficiary's Passport Number: \_\_\_\_\_

Confirm if the Beneficiary's Passport photo is provided: ☐ Yes



*I confirm that all the above refund beneficiary's compliance information is accurate and true.*



*I understand that any incorrect or incomplete information may result in a delay or failure to process the refund payment. In that case, I will take responsibility for all risks and losses, including bank charges incurred.*

**Student name:** \_\_\_\_\_

**Student ID:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

(Must be handwritten)