International Student Deposit Refund Request

General Information:

Today's Date: _____ SID#: _____

Full Name: _____ _____ _____
Last (Surname) Name First (Given) Name Middle Name (if applicable)

Refund Request and Statement of Good Standing:

Initial _____ I, _____, _____ request a full refund of the
Full Name SID#
International Student Deposit that I paid in partial fulfillment of the application for admission to Southeastern Baptist Theological Seminary.

Initial _____ I, per the refund policy, acknowledge that I have been a full-time student at this same institution for a period of not less than one full academic year and have completed at least two full semesters of course study.

Initial _____ I acknowledge I am either (please circle one):

a. A current F-1 full-time student who is in good standing at Southeastern Baptist Theological Seminary.
b. A graduate of Southeastern Baptist Theological Seminary that is returning (or has returned) to my home country.
c. A border-commuter who is in good standing.
d. A current F-1 full-time student who could greatly use the deposit towards my tuition to avoid financial difficulty.

Initial _____ I attest that each of my student-related accounts is in order, and I am in full compliance with all of the current requirements of this institution.

Initial _____ I attest that I am in full compliance with all current immigration regulations of the U.S. government (SEVP, Homeland Security, ICE).

Initial _____ I understand that the above statements may be subject to verification, and if found to be false, can result in the termination of my F-1 status. I also understand that if there is any remaining unpaid balance on my account, then my refund may be used to pay any remaining balance.

Student Signature: _____ Date: _____

Approved?		**Authorized Signature (PDSO)**	**Comments**
Yes ☐	*No* ☐		

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