

STUDENT ID NUMBER

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**FNU****FIJI NATIONAL UNIVERSITY**P.O. Box 7222 Nasinu FIJI. Telephone: (679)3394000/(679)3381044 Facsimile: (679)3393230
Website: www.fnu.ac.fj**SAS14
(A)****APPLICATION FOR HIRE / REFUND OF GRADUATION GOWN****A PERSONAL DETAILS**

Full Name (as per birth certificate) :	_____
Email address :	_____
Phone Contact :	_____

B GRADUATION DETAILS

College :	_____	
Programme :	_____	
Master List Details :	_____	
Date of Graduation :	_____	
Number of Tickets	<input type="text"/>	
SAS Officer:	Date:	Stamp:

C RETURN OF GOWN (Please attach Receipt)

This is to certify that:		
<input type="checkbox"/>	Gown / Trencher / Hood has been returned in good order	
<input type="checkbox"/>	Gown / Trencher / Hood Damaged (No Refund)	
SAS Officer:	Date:	Stamp:

D BANK DETAILS (Please attach a copy of the bank statement)

Name of Bank (Tick which is applicable)	<input type="checkbox"/>	BSP	<input type="checkbox"/>	ANZ	<input type="checkbox"/>	WBC	<input type="checkbox"/>	BRED	<input type="checkbox"/>	BOB	<input type="checkbox"/>	OTHERS
Bank Account Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Account Holder	_____											

E STUDENT DECLARATION

I hereby affirm the information provided within this form to be true and accurate. I authorize and take full responsibility for my gown refund to be processed to the above bank account details provided. I understand that all payments from this time on will be paid according to this information. If any changes need to be made, I will inform the Fiji National University of these changes in writing.

Signature: _____ Date: _____

Email Complete Form to: gc@fnu.ac.fj