

Updated: August 1, 2025

Parent Registration Fee Refund Request - FACTS

Registration Fees are non-refundable except through special requests.

Special requests require the review and approval from the Tuition Management office (TMO)

School Information						
School Name:		Cat	Catholic School Region:			
Student Information Student(s) ID#		Phone:				
Customer Name:						
Student(s) Name:			Grad	le(s):		
Address*:						
*Refunds are issued to the origi	nal method of payment.					
	R	Reason for Refund				
		e PaymentUPK Enrol	lment			
_	School Cannot Accom	modate StudentOthe	er (Describe Below))		
Description			Amount			
Refund Amount Approved			\$			
Refund Amount Approved			\$			
If Withdrawn:			\$			
If Withdrawn: Has Admission/Enrollment Sta			\$			
If Withdrawn:			\$			
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated?	YesNo	YesNo				
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated? Approved by School Principal:	YesNo	YesNo	Date:			
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated? Approved by School Principal: Approved by TMO Tuition Billi	YesNo ng Coordinator:	YesNo	Date: Date	:		
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated? Approved by School Principal:	YesNo ng Coordinator:	YesNo	Date:	:		
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated? Approved by School Principal: Approved by TMO Tuition Billi	YesNo ng Coordinator: or of TMO:	YesNo	Date: Date Date:	:		
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated? Approved by School Principal: Approved by TMO Tuition Billi Approved by Associate Director	YesNo ng Coordinator: or of TMO:	YesNo	Date: Date Date:	:		
If Withdrawn: Has Admission/Enrollment Sta Has SIS Status been updated? Approved by School Principal: Approved by TMO Tuition Billi Approved by Associate Director	yesNo ng Coordinator: or of TMO: Date Paid:	YesNo	Date: Date Date: mount: \$:	Type: CC	Check