Department of [Department Name]
KO Mbadiwe University

Date: [DD/MM/YYYY]

The Bursar

Through:
The NELFUND Desk Officer
KO Mbadiwe University

Subject: Request for Refund of NELFUND Loan for 20XX/20XX Academic Session

Dear Sir,

I, [FULL NAME], with Matriculation Number [KOMU Matric Number – 10 digits], respectfully write to request a refund of the NELFUND loan disbursed for the payment of my school fees for the 20XX/20XX academic session.

This request is necessitated by the fact that I had already paid my school fees for the **academic sessions** under review prior to the disbursement of the loan. Accordingly, I hereby apply for a refund of the loan amounting to [NAmount].

Attached are copies of the receipts and other relevant evidence confirming payment of my school fees for the aforementioned session(s).

Kindly find below my bank details for the refund process:

• **Bank Name:** [Bank Name]

• Account Name: [Account Holder's Name]

• Account Number: [Account Number]

I would be grateful for your kind consideration and approval of this refund request.

Thank you for your attention.

Yours faithfully,

[Your Full Name] [Signature]