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**Application processing fee terms and conditions**

1. The College’s postgraduate application processing fee is subject to a fourteen (14) day cancellation period. During this period you are entitled to receive a full refund subject to the terms below.
2. You have the right to cancel your application without giving any reason if the cancellation request is sent within the fourteen (14) day cancellation period, which ends at the end of 14 days after the day on which the payment confirmation email is sent to you.
3. In order to cancel your application processing fee payment, you may either:
   1. Use the cancellation form available below; or
   2. Email [appfees@imperial.ac.uk](mailto:appfees@imperial.ac.uk), with the email subject line clearly marked as: “Application processing fee cancellation”

In either case, you should ensure that a copy of your application processing fee confirmation email is included as proof of payment.

1. We will aim to acknowledge your cancellation request within five (5) working days.
2. The application processing fee is non-refundable after the fourteen (14) day cancellation period.
3. If you cancel your application as provided above, the College will;
   1. Treat your application (and any offer of a place, if made) as withdrawn; and
   2. Refund the application processing fee back to the credit or debit card used to make the initial payment by the end of 14 days after the day on which you informed us of your decision to cancel.
4. If you have any questions about the application processing fee, please [appfees@imperial.ac.uk](mailto:appfees@imperial.ac.uk).

**Cancellation Form**

To: [appfees@imperial.ac.uk](mailto:appfees@imperial.ac.uk), Imperial College London, South Kensington Campus, London, SW7 2AZ

I hereby give notice that I cancel my contract for the application processing fee.

Programme applied for:

Date that payment confirmation was received:

Name:

CID:

CPG Number (included in the payment confirmation email):………………………………………………

Email:

Signature (not required if submitting form electronically):

Date: