



# Refund Request Form

**1. Appointment Number**

**2. Intending to submit application in which center**

**3. Appointment Booked for which center**

**4. Applicant Name**

**5. Registered Email Address**

**6. Appointment Booked for Which Mission**

**7. Date of Appointment**

**8. Date of Appointment Cancellation**

**9. Date of Payment**

**10. First                      4-digit                      of                      Debit/Credit                      Card**

**11. Last 4-digit of Debit/Credit Card**

**12. Reason for Refund**

**13. Remarks**

We kindly request all applicants that please send your refund request forms, along with all supporting documents, to the specified inquiry email addresses of the Germany Visa Application Centers. Please ensure that you place your refund request with the same center where you originally booked your appointment. The relevant visa application center email addresses can be found on the "Contact Us" page of the website.