

Refund Form

Student details	Name		Surname	
Contact Number				
Email address				
Course Name				

Reason Refund

- Enrolment cancelled prior to course commencement
- Course Cancelled by the Institute
- Failed to commence
- Other (attach documentary evidence)

Detail why a refund is being requested:

Payment Details

BSB		
Account Number		
Account Name		

Declaration

I hereby apply for a refund of fees paid and acknowledge that this refund application will be processed in accordance with the Refund Policy, which I have read and understood.

Signature

Date

Office Use Only

Refund Approved		Refund NOT Approved	
Refund Approved by		Date	
Total Amount of refund			