

REFUND APPLICATION FORM

This Application must be completed and lodged to receive a refund. Please see Refund Policy for refund eligibility.

Student Name:	First/Given Names:			
	Surname:			
Student ID: Address:	Street Address:			
Address.				
	Town/ Suburb:		State:	Postcode:
Phone Number:	Home:		Mobile:	
Email Address:				
Direct Debit Details:				
COURSE DETAILS:	Course Name: Course Commencement Date: Was this course government subsidised: YES / NO Total Fees Paid: Tuition Fees: \$ Material Fees: \$ RPL Fees: \$			
	Refund Request Amount::	\$		
Additional Comments				
Attached additional pages if re	equired			
	Date:			
-	on are subject to eligibility in		_	
	Lodgement of this Application to lodge Refund Application For	is not a guarantee	e of refund grante	ed.
OFFICE USE ONLY				
Refund Approved	☐ YES (if Yes, complete	below)	NO (if No, inform	student of outcome)
Approval Refund Amount:	\$			
Authorised By (Signature):				
Refund Processed Date:				
Payment method:	☐ Cheque #	🗆	Direct Debit Rece	ipt #
Entered in Refund Register Date:				