

COURSE REFUND APPLICATION

This form is to be used for individual participants.

Learner Name: _____

Course/Module Name: _____

Program Commencement Date: _____

Please complete the following if you believe you are entitled to a refund: (tick one box only)

- My preferred course has been cancelled or postponed indefinitely
- My preferred course has been cancelled or postponed to a date unsuitable to me
- My preferred course has been transferred to a location unsuitable to me

I wish the refund to be returned in the following manner:

- Cheque and sent to this address _____
- Direct Debit: BSB number _____ Account Number _____

Please add any further information you would like to be considered for this application (attach any supporting documents)

Declaration

I acknowledge that:

- a) By signing this refund application form in no way exempts me from payment of fees incurred. My application for a refund will be assessed and I will be informed in writing of the outcome.
- b) I will not receive any academic transcripts until all outstanding payments have been finalised.
- c) I agree to complete a third party authorisation, if I request to receive the refund in any third party account.

Student signature: _____ Date: _____

OFFICE USE ONLY

| Amount refunded | Date of refund | Date refund posted | Signed |
|-----------------|----------------|--------------------|--------|
| | | | |

Refund Approved By: _____ Date: _____