

## Refund Application Form

**Date:** \_\_\_\_\_

**Course:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Student ID:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Course Start Date:** \_\_\_\_\_

I wish to apply for a refund for the tuition fees paid for the course described above and my reasons for applying for a refund are:

Please Tick Box	Refund Reason	Type of Refund
<input type="checkbox"/>	Visa refused prior to course commencement	Full refund
<input type="checkbox"/>	Withdrawal prior to agreed start date	Full refund of pre-paid tuition fees
<input type="checkbox"/>	Withdrawal after course commencement	No Refund of pre-paid fees
<input type="checkbox"/>	Withdrawal after course commencement (with confirmed extenuating circumstances)	Refund of unused tuition fees
<input type="checkbox"/>	Extra fees paid	Full Refund

### **Student's Bank Account Details:**

**Bank Name:** \_\_\_\_\_

**Account Name:** \_\_\_\_\_

**BSB:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_

**SWIFT Code (Required Only For Overseas Account):** \_\_\_\_\_

*Please note:*

- Where the student breaches Australian Institute of Engineering's Policies and Procedures no refund is payable.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# Australian Institute of Engineering

ABN: 13 612 727 143

Registered Training Organisation ID 45356 | CRICOS Provider Code 03685G

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## Administration Use Only

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| 1. Refund Application processed?                    | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Refund Granted?                                  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Refund Paid and enrolment cancelled              | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Default notification provided to TPS as required | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Outcome of refund process reported to TPS        | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

**Refund Amount:** \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Signature & Date: \_\_\_\_\_