



REFUND REQUEST FORM

| Personal Details | |
|--|-------------|
| Full Name: | Student ID: |
| Email Address: | |
| If refund is to be paid to an overseas account | |
| Address: | |

| Refund Payment Details | | | |
|--|---|--------------|--|
| <input type="checkbox"/> Direct Deposit into Bank Account. Please note: Overseas Bank Account Transfer may take up to 6 weeks | | | |
| Bank Name: | | | |
| Branch Address: | | | |
| BSB No: (Domestic only) | | | |
| Account No: | | | |
| Account Holder Name: | | | |
| Swift Code: (overseas only) | | | |
| IBAN / Routing No: (Overseas only) | | | |
| Bank account details must either belong to the student or the original payer (proof of payment must be attached). | | | |
| <input type="checkbox"/> Original Credit or Debit Card Used for Payment | | | |
| Card No: | ____ _ ⊗ ⊗ ⊗ ⊗ ⊗ ⊗ ⊗ ⊗ ____ ____ Please provide first and last four digits only | Expiry date: | |

| Declaration | |
|---|-------|
| I, the student, authorise this payment to be made to me or the original payer and the information provided on this form is correct and true to the best of my knowledge. | |
| I understand that payments made by credit or debit card are subject to the Payment Card Industry Data Security Standards and will only be refunded back to the original card. | |
| Student's Signature: | Date: |

| Office Use Only | | |
|-----------------------------|-----------------|---------------|
| Refund amount: | Payment Method: | Payment Date: |
| Deposit refund approved by: | | Date: |