

HFS02 Application for Refund of Fees Form

Refer to the Fees and Refund Policy and Procedure for the full details

Student details						
Student Name:						
Student ID (if applica	ble):					
Course Enrolled:						
	Phone:					
Contact Details:	Address:					
	Email:					
Date:						
Reason for refund						
Failure to obtain Student Visa (for international students only) (please provide documentary evidence)						
Change of course (please specify and provide documentary evidence)						
Other (please specify and provide documentary evidence)						
Provide details for the	ne refund request					
Refund processing details						
NOTE: Refund will be paid only to the student that has made the application. Refund will not be paid to any third party or representative of the student unless						
there is sufficient documenta	ary evidence that there is a direct	ct relationship with student. (HPPS011 Fees and Refund Policy and Procedures				
Direct Credit (within						
Account Holder Name):					
Name of Bank:						
BSB No. (in Australia)):					
Account No:						
BY Cheque (within A	ustralia only)					
Account Name:						
Telegraphic Transfe	r (Overseas)					
Name of Bank:						
Bank Address:						
Bank Branch:						
Account Holder Name	:					
Account No:						
Swift Code:						
IFSC Code (India only	/):					
Student Declaration						
I understand that the application will be assessed for eligibility for refund according to HPPS011 Fees and Refund Policy and Procedures. I acknowledge that I have read and understood the HPPS011 Fees and Refund Policy and Procedures.						
Signature:		Date:				



Office Use Only

FOR Office Use Only						
	Admissions (for visa refusal) - verified th (include printout of PRIMS/VEVO/COR	By:	Date			
	Student Service – Cancellation / Withdra	By:	Date:			
	Finance Dept Verify the correctness of	Ву:	Date			
	Finance Dept Check the amount to be Fee, Admin Fee, Date of Application)	Ву:	Date			
	Finance Dept. – A letter for refund applic	By:	Date			
	Finance Dept – note made on student fil	Ву:	Date			
	CEO or Nominee- Refund was approved, and the transaction completed		Ву:	Date		
	Finance Dept. – follow the File Closing p	By:	Date			
	Informing the student by	☐ Email	Ву:	Date		
		☐ Face to face meeting	By:	Date		
Staff in charge Name:						
Staff in charge Signature:			Date:			