

REQUEST FOR REFUND - DOMESTIC STUDENT



TRAINING &
EDUCATION

PERSONAL DETAILS	
AHTS Student ID:	Date of Birth:
Family Name:	Given Names:
Postal Address:	
Contact Phone Numbers (day):	Email Address:
COURSE ENROLLED:	
Course Name:	
Course Start Date:	
REASON FOR REFUND:	
<input type="checkbox"/> Course Withdrawal <input type="checkbox"/> Overpayment of Course Fee <input type="checkbox"/> Other. Please specify _____	
BANK DETAILS FOR REFUND PAYMENT: (Please note: the payment must be refunded to the person who paid the tuition fee in the first instance)	
<i>AUSTRALIAN BANK ACCOUNT</i>	
<u>Bank Name:</u>	
<u>Account Name:</u>	
<u>BSB Number:</u>	
<u>Account Number:</u>	

I have read and understand the refunds policy on my Letter of Offer and I certify that all information provided above, including supporting documentation and evidence, is true and correct.

Student Signature: _____ Date: _____

Are you under 18 years old? Yes No

If yes, your parent or guardian must sign below:

Parent/Guardian Name: _____

Signature: _____ Date: _____

OFFICE USE ONLY

Date Received	Refund Approved	Refund Confirmation Letter Issued	A'Com Checked	Date of Refund Paid (in compliance with ESOS requirements)
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	