

## Refund Application Form

### Student Details:

Students Name:			
Student I.D.:		Date:	
Course/s Enrolled in:			
Email Address:		Contact Number:	
Address			

### Refund Details

Please tick the applicable box for the subject of your refund:

☐ Tuition Fees      ☐ Other (Please specify):

Please tick to indicate the prominent reason that you are applying for your specified refund and elaborate on your circumstance in the space provided below.

- ☐ Visa refused Prior to course commencement  
☐ The institute is unable to provide the course for which the offer was made  
☐ Withdrawal from the course after fees have been paid before commencement  
☐ Withdrawal notified and received by institute on commencement date or after the semester commences  
☐ Student breach of visa conditions, and suspension or cancellation of enrolment by the institute  
☐ Visa Extension refused  
☐ Other (Please Specify):

### Please Elaborate:

\* Please note that refunds granted in the above circumstances may incur an education agent's fee where applicable. Refund application will be assessed according to Fees and Refunds Policy and Procedures as published on Institute of Business and Management (Victoria)'s website [www.ibm.voc.edu.au](http://www.ibm.voc.edu.au)

Refund payments (if approved) will be processed using the same method of payment that fees were originally paid with.

Refund Payable to:	
Address of Payee:	
Contact Number of Payee:	

### Payment Methods:

- ☐ Cheque (to be sent to the above address)  
☐ Cheque (Collect from College Reception)  
☐ Bank Transfer  
☐ Credit Card (Card number payment was originally made with)

In case of bank transfer, please fill out bank details below:

Account Holders Name:	
Bank Name:	
Bank Address:	
BSB:	
Account Number:	
Swift Code:	

Please return this completed form to the institute. If sending by email, please send to [info@ibm.vic.edu.au](mailto:info@ibm.vic.edu.au)

Office Use Only			
Refund Request:	<input type="checkbox"/> Approved <input type="checkbox"/> Declined		
Amount Paid AUD:			
Administration Officer Signature:		Date:	
CEO Signature:		Date:	