

## Refund Request Form

By filing in this form, you are requesting to apply for a refund of course fees in part or in full.

Each refund request is looked at on an independent basis. This form must be lodged to the CEO, or in their absence the Administrator, within the time frame relevant to the refund request as outlined in the refund policy.

A response will be issued to you within 4 weeks after the claim has been received and if successful a refund will be made as per the refund policy depending on the circumstances.

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

Name: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Course Enrolled in: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Please detail in full, your reason for requesting a refund.

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Students Signature: \_\_\_\_\_

You will be advised within four weeks, thank you

### OFFICE USE ONLY

Received by: \_\_\_\_\_ Refund Number Issued: \_\_\_\_\_

Date: \_\_\_\_\_ Authorised by: \_\_\_\_\_

Outcome: \_\_\_\_\_

Date if Refund issued: \_\_\_\_\_ Amount: \_\_\_\_\_