

Refund Application Form

Part A: Personal Details

Student ID:

Student Name: _____

Date of Birth: _____

Address: _____

Suburb: _____

Postcode: _____

Phone: _____

Mobile: _____

Email: _____

Course Details

Course Name: _____

Commencement Date: _____

Part B: Reasons for your application (Student to complete)

Please tick one

- Initial Visa Refusal: **Full Refund minus the enrolment fee-\$200**
- AEA is unable to provide the program: **Full Refund**
- Transfer to another provider, before 6 months into the Principal course: **No Refunds**
- Withdrawal more than 8 weeks prior to course or semester commencement: **Full refund of your course fees less an administration fee of \$200**
- Withdrawal between 8 weeks and 4 weeks from the start of the course: **50% of the fee's paid for each and every course in the "package of courses", less A\$200 Administration Fee.**
- Less than 4 weeks from the commencement of the course : **25% of the fee's paid for each and every course in the "package of courses", less A\$200 Administration Fee.**
- Withdrawals after the course or semester Commences: **No Refunds for each and every course in the "package of courses".**
- Other (Please specify)

Please state why you wish to apply for a refund. Don't forget to provide evidence to back your claim

Part C: Student Declaration (Student to complete)

- I am aware of the academic and financial consequences of the above request and have sought appropriate advice on these matters.

- I understand that withdrawn units will appear on my academic record.
- I understand and agree to be bound by AEA's policies and deadlines for the processing of refunds.
- I declare that the information I have given on this application is correct and understand that by knowingly making false or misleading statements that I may be liable for prosecution.
- I also authorize AEA to gather and obtain any necessary information pertaining to this application.

Signature _____

Date _____

Part D: Payment Record (Student to complete)

Paid Amount: \$_____ | Payment Date: ___/___/___

Paid Amount: \$_____ | Payment Date: ___/___/___

Paid By: Cash EFT Credit Card TT

Attach evidence of Payment to support your application

Part E: Refund Payment Instruction (Student to complete)

Please Note: Payment made via Credit Card initially, refund will be credited back onto the same Credit Card ONLY (Refund cannot be processed if you do not fill up this section correctly)

Electronic Payment to Australian Local Bank

Bank name and address: _____

BSB: _____

Account No.: _____

Account Name: _____

Telegraphic Transfer (TT) to Overseas

Bank Beneficiary Details:

Name: _____

Address: _____

Country: _____

Date of Birth: ___/___/___ Country of Birth: _____

Bank Details

Bank Name: _____

Account Number: _____

SWIFT Code: _____

Branch Code*: _____

Bank Address: _____

Country: _____

Please note that bank charges if any, will be deducted from the approved refund amount. If fees have been paid to OSHC, student must obtain refund direct from OSHC provider.

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OFFICE USE ONLY

Part F: Refund Application Decision Record

Name of Receiver: _____ Date Received: _____

Decision:

<input type="checkbox"/>	Approved Full Refund – 100% of Tuition Fee, and other Student Fees except
<input type="checkbox"/>	Approved Partial Refund -50 % of Tuition Fee, and other Student Fees except
<input type="checkbox"/>	Declined – No Refund
<input type="checkbox"/>	Other Amount:

Reason:

Part G: Refund Calculation Table

Fee Type	Amount Received	Date Received	Approved Refund %	Refund Amount
Enrolment Fee	\$		Non-Refundable	\$
Tuition Fee	\$			\$
Material Fee	\$			\$
OSHC	\$			\$
Total Amount Received	\$	Total Refund Amount Payable to the Student:		\$

Signature: _____ Date Processed: _____