



REFUND APPLICATION FORM

This form must be used by students applying for refund applications and addressed to the College CEO. If refund applications are lodged in any other way the applicant will be contacted by the College and required to complete this Student Refund Application Form. The full Fees and Refund Policy and Procedure is available on the website at: www.melbournecitycollege.edu.au Applications for refunds will also be accepted by mail or by email. Refunds will be made within 28 days of receipt of this application and will include a statement explaining how the refund was calculated if the refund is approved.

- Please fill form using CAPITAL/BLOCK LETTERS.

Date (DD/MM/YYYY): / /	Email Address:
Student No.:	Mobile Phone No:
Given Name:	Address:
Family Name:	USI No.:
Date of Birth : / /	
Course Code & Name:	
Reason for Refund Application:	

Student Bank Details:	
Bank Name: _____	
Bank Address: _____	

Account Name: _____	
BSB No.: _____	
Account Number: _____	
Swift Code (overseas banks): _____	
Amount of Refund being requested: \$ _____	
Student Signature:	
FOR OFFICE USE ONLY	
Refund Approved:	<input type="checkbox"/> Yes <input type="checkbox"/> No Date: / /



Refund Amount Approved:		\$	
Approved By:	Name:	Refund transferred (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
		PRISMS Updated (If applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
		Wisenet Updated (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	Position:	Refund Register Updated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	Signature:	Notification to student attached	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Comments:			