REFUND REMITTANCE AUTHORISATION FORM

Note: This form is to be completed by a student who requests a refund to be remitted to a bank account that does not belong to the student.

I, the undersigned, with the following details:

Student No.:		Email Address:	
Given Name:		Mobile Phone No:	
Family Name:		Address:	
Gender:	❑ Male ❑ Female		
Date of Birth:	/ /	USI No.:	
Course Code & Name:			

authorise my refund to be remitted to the following bank account that does not belong to me:

Bank Name:	
Bank Address:	
Account Name:	
Account Holder Address:	
BSB No.: *(Only for a local Australian Account Holder)*	
Account Number:	
Swift Code (overseas banks):	
Amount of Refund Being Requested:	$
Bank Account Currency: (e.g. AUD, USD, the student's country local currency)	

Student Declaration

I am aware that once Melbourne City College Australia remits my refund as per the college's refund policy to the above bank details, the college's refund obligations are completed. I acknowledge that Melbourne City College Australia will not be liable for any future issues as a result of this authorisation, and I indemnify the College for any loss or damage because of my authorisation to remit my refund to the above bank account details.

Student Signature: _____

Date: _____