

Refund Application Form

Document No.: \$C15.1

Student Name:			Student ID:	
Date of Birth:			Date of Withdrawal:	
Course:				
Refund reason				Please tick box
I have commenced my course and withdraw from my course				
I have not commenced my course				
Visa Refused by Department of Home Affairs				
Course cancelled or rescheduled by Everest Institute of Education (Ei)				
Withdrawing or cancelling due to compassionate & compelling circumstances				
Other Reasons -				
Student Signature:				
Printed Name:				
Date:				
Student bank account details for refund (for Australian Bank Account):				
Bank Name:				
Account Holder Na	ame:			
BSB:				
Account Number:				
Student bank account details for refund (for International Bank Account):				
Bank Name:				
Account Holder Name:				
SWIFT/BIC Code:				
Account Number/l	BAN:			
Recipient's Address:				

Tel: (03) 8393 6550 E-mail: enquiries@everest.edu.au Website: www.everest.edu.au



Entered by _____

Documentation Filed in Student File Yes / No

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Filed by _____

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Course Fees affected: - No / Yes, If Yes Difference in Fees Amount \$______ Outstanding Fees: - No / Yes, If Yes Amount due \$______ Refund Amount:-______ Circle - Approved / Not Approved By _______ /___/ (CEO/Manager Signature) (Date) Updated on Student Management System Yes / No Date Update ___/__/__

Student Informed of the Outcome Yes / No Informed by ______

OFFICE USE ONLY