



REFUND APPLICATION FORM

Given Name:			
Family Name:			
Student ID			
Address:			
Suburb:		Country:	
Post Code:		Email Address:	
Course Name:			
Course Code:			
Course Start Date:			
Agent Name and contact details (if applicable)			
Please state your reason for a refund application: (Attach additional papers if you need more writing space)			
Date of payment made			
Amount of payment made			
Method of payment made			
Banking details <i>(Please write the details of your account in which you want your refunds to be transferred)</i> *Please note that if you choose to nominate your Agent's bank details for the refund, ETEA will not be responsible for any follow-up with the agent.	Domestic Student:	International Student:	
	Name of Account:	Name of Account:	
	BSB number:	Swift Code:	
	Account Number:	Account Number:	
	Name of bank:	Name of bank:	
	Branch Address:	Branch Address:	

I declare that the bank details provided above are correct and I understand that if I have nominated my Agent's bank details for the refund, ETEA will not be responsible for any further claims.

Student Signature: _____

Date: _____

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Document Name	Refund application form	Company name	ETEA	Issued:	Feb 2025	Ver 5
Authorised by QMC		CRICOS # 02925E	RTO # 5089	Review:	24 months	
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Office Use Only**Refund Calculations:** (description of how refunds are calculated below)

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Outline action is taken and outcome

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Refund (please ✓): Paid ☐ Not Paid ☐ Date Paid/...../.....

Recommended and assessed by Accounts Department (please✓): [☐] Yes [☐] No

Account Department Signature:

..... Date...../...../.....

Authorised by CEO (please✓): [☐] Yes [☐] No

CEO Signature:

..... Date...../...../.....

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