



## REFUND REQUEST FORM

### STUDENT'S PERSONAL DETAILS:

<b>Full Name:</b>			
<b>Date of Birth</b>			
<b>Course Name:</b>			
<b>Course Start Date:</b>			
<b>Phone No:</b>		<b>Email:</b>	
<b>Address:</b>			

### REFUND DETAILS:

**Reason for Refund (Add extra sheet if you find space is not enough to write reason)**

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Note: Please provide the relevant documents as evidence to support your request for refund.

#### **Bank Transfer (Please enter bank account details in which you would like to receive your refund)**

Bank Name			
Bank Branch			
Account Name			
BSB			
Account Number			
Swift Code		Country	

### ACKNOWLEDGEMENT

I understand that my request for a refund will be processed in accordance with SITS's Refund Policy.

I also understand that I shall have 20 days to access the Complaints and Appeals process, should I not agree with the outcome or decision.

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

Request received	Signature	Date	
Refund Applicable			
Comments			Date the letter was sent:
Refund processed	Signature	Date	