



Refund Request Form			Refund No.	
<b>Section 1 – Student Details</b>				
<b>Name:</b>		<b>Date:</b>		
<b>Date of Birth</b>		<b>Student No:</b>		
<b>Email:</b>		<b>Mobile:</b>		
<b>Course:</b>		<b>Start Date:</b>		
<b>Section 2 – Refund Details</b>				
<b>I request a refund for the following:</b>				
<b>Invoice Number:</b>		<b>Amount:</b>	\$	
<b>Reason for refund: (Please attach any supporting documentation)</b>				
<input type="checkbox"/> Visa Refusal <input type="checkbox"/> Cancellation <input type="checkbox"/> Credit Transfer <input type="checkbox"/> Visa Renewal Refusal <input type="checkbox"/> Withdraw <input type="checkbox"/> Deferment <input type="checkbox"/> Visa Breach of Condition <input type="checkbox"/> Transfer <input type="checkbox"/> Other, Description _____				
<b>Acknowledgement</b>				
I understand that my request for a refund will be processed in accordance with the Platinum Institute Australia Refund Policy.				
<b>Bank Details of Student</b>				
<b>Swift Code:</b>		<b>BSB Number:</b>		<b>Account Number</b>
<b>Account Name:</b>				
<b>Signature</b>		<b>Date:</b>	/ /	
<b>Section 3 – Authorisation</b>				
<b>Please tick the type of Refund:</b>				
<input type="checkbox"/> Withdrawal <input type="checkbox"/> Cancellation <input type="checkbox"/> Transfer <input type="checkbox"/> Other (please specify)				
<b>This Refund is:</b>				
<input type="checkbox"/> APPROVED		<input type="checkbox"/> DENIED		<input type="checkbox"/> ADJUSTED TO \$
<b>Units or items to be refunded</b>				
<b>Item or UOC</b>	<b>Code and title or Item</b>	<b>Amount in AUD \$</b>	<b>Total amount</b>	
<b>Item or UOC</b>				
<b>Amount received</b>				
<b>Less cancellation fee</b>				
<b>Less application fee</b>				
		<b>Total Amount of Refund</b>		



<b>Refund Method is:</b>			
<input type="checkbox"/> EFT / CC	<input type="checkbox"/> Cheque	<input type="checkbox"/> Credit to Students Platinum Institute Australia Ongoing Account	
Refund payable to	<input type="checkbox"/> Student	<input type="checkbox"/> Agent	
<b>Signed:</b>		<b>Position:</b>	
<b>Print Name:</b>		<b>Date Processed:</b>	
<b>Admin Use Only</b>			
<b>Logged in FMS:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b> / /
<b>Logged by:</b>		<b>Signature:</b>	
<b>Recorded in student file</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b> / /
<b>Recorded by:</b>		<b>Signature:</b>	
<b>CRICOS Management Signature:</b>		<b>Date:</b>	