

Student Refund Application



NOTE: All refunds are subject to the terms and conditions outlined in the TAFE Queensland *Domestic Student Refund Policy* and *International Student Refund Policy*, as presented to students through the [TAFE Queensland Student Rules and Policies](#). Lodging a refund application does not automatically imply that a refund will be granted. Each refund application will be individually assessed for eligibility. An Administration Fee will be applied as outlined in the [TAFE Queensland Student Rules and Policies](#).

STUDENT DETAILS			
Student number:	Family Name:	Given Name/s:	Student: <input type="checkbox"/> Domestic <input type="checkbox"/> International
Email address:	Phone:	Mobile:	
Postal address:	State /Country:	Post Code:	
REASON FOR REFUND REQUEST <small>(** Documentary evidence must be attached).</small>			
<input type="checkbox"/> Domestic Students	1. <input type="checkbox"/> Student Withdrawal Prior to Start of Study Date (or on or before the Census Date for FEE-HELP, VET FEE-HELP, or VET Student Loans eligible students) 2. <input type="checkbox"/> Student Withdrawal On or After Start of Study Date (or after the Census Date for FEE-HELP, VET FEE-HELP, or VET Student Loans eligible students) <i>Select reason below:</i> 2 (a) <input type="checkbox"/> Student choice (User Choice funded students only) 2 (b) <input type="checkbox"/> Units cancelled by employer (User Choice funded students only) 2 (c) <input type="checkbox"/> Credit transfer approved (only applies if credit transfer request was submitted prior to the start of study date) 2 (d) <input type="checkbox"/> Medical circumstances ** (supported by doctor's statement) 2 (e) <input type="checkbox"/> Family circumstances ** (supported by a statement from a TAFE Queensland counsellor or Director of Faculty, or equivalent) 2 (f) <input type="checkbox"/> Employment Related Circumstances ** (supported by employer's statement) 2 (g) <input type="checkbox"/> Course Related Circumstances ** (supported by a statement from a TAFE Queensland Director of Faculty, or equivalent) 2 (h) <input type="checkbox"/> Accepted a place offered through QTAC or higher education institution for the current semester ** (supported by evidence of acceptance of offer) 2 (i) <input type="checkbox"/> Other (please specify)		
<input type="checkbox"/> International Students	Student Withdrawal: <i>Select reason below:</i> 1 (a) <input type="checkbox"/> Student choice (only applies for withdrawals prior to course commencement date) 1 (b) <input type="checkbox"/> Visa rejection 1 (c) <input type="checkbox"/> Credit transfer approved (only applies if credit transfer request was submitted prior to course commencement date) 1 (d) <input type="checkbox"/> Withdrawal by TAFE Queensland due to incorrect or incomplete information supplied by student 1 (e) <input type="checkbox"/> Withdrawal by TAFE Queensland due to failure to meet English language or entry requirements for next course of study (however no breach of written agreement) 1 (f) <input type="checkbox"/> Medical circumstances ** (supported by doctor's statement) 1 (g) <input type="checkbox"/> Family circumstances ** (supported by a statement from a TAFE Queensland counsellor or Director of Faculty, or equivalent) 1 (h) <input type="checkbox"/> Course Related Circumstances ** (supported by a statement from a TAFE Queensland Director of Faculty, or equivalent) 1 (i) <input type="checkbox"/> Other (please specify)		
THIRD PARTY DETAILS <small>(This section must be completed if the refund is to be paid to a Third Party. Third Party refunds MUST be signed by the student where no official Third Party Contract exists)</small>			
<input type="checkbox"/> Organisation <input type="checkbox"/> Individual	ABN / Date of Birth:	Name:	
Email address:	Phone:	Mobile:	
Postal address:	State /Country:	Post Code:	
DOMESTIC STUDENTS ONLY <small>(If approved, provide details on how the refund is to be issued).</small>			
Refund payable to:	State:	Post Code:	
<input type="checkbox"/> Direct bank account deposit: Account Holder/s:	BSB:	Account number:	
INTERNATIONAL STUDENTS ONLY <small>(If approved, all refunds to be deposited into nominated bank account).</small>			
Refund payable to:	Beneficiary Account Name:	BSB:	Account number:
Country:	Bank Name:		

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Bank Address:			
Overseas bank account	SWIFT code:	IFSC code (India only):	IBAN Number (For EU Countries):
INTERMEDIARY BANK <input type="checkbox"/> Yes <input type="checkbox"/> No			
Intermediary Bank Name:		Intermediary Bank SWIFT Code (Routing Number/BIC Number):	
Intermediary Account Number:		Country:	
ACKNOWLEDGEMENT			
<input type="checkbox"/> I certify that the information on this form is correct and complete <input type="checkbox"/> Student <input type="checkbox"/> TAFE Queensland Staff (Domestic only)			
Student Signature:		Date: / /	Parent/Guardian Name and Signature <i>(If student is younger than eighteen (18) years of age and is in the care and control of a parent or guardian)</i>
		Name (Please print):	Contact phone no:
		Signature:	Date: / /

Confidentiality and Disclosure of Personal Information: TAFE Queensland complies with the Right to Information Act 2009, Information Privacy Act 2009 and the QLD Public Records Act 2002. We will not make public, disclose or use for purposes other than those required to provide the services requested, the personal information of the customer except to the extent necessary to comply with any government policy relating to the public disclosure of confidential information (which policy is in place at the time of reading this document), the customer provides written consent or we are required to by law or Court order.

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OFFICE USE ONLY	
Refund recommended: <input type="checkbox"/> Yes <input type="checkbox"/> No	REFUND AUTHORISED BY FINANCIAL DELEGATE: Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No
If no, reason:	If no, reason:
Name of submitting Officer: _____ Date: / /	Pro-rata refund amount approved: \$
Position: _____ Signature: _____	Name: _____
Change of enrolment processed N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	Position Title: _____
Is the Admin fee to be applied <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature: _____
	NON-APPROVAL SENT TO STUDENT: <input type="checkbox"/> Yes <input type="checkbox"/> No Date: / /
Account Balance/Pro-Rata Refund Approved: \$	ACTIONS COMPLETED BY INTERNATIONAL:
Less Administration Fee (if applicable): \$	Name: _____
Total refund to be paid:	Date: / /
\$	<input type="checkbox"/> Added to International Refund database
	REFUND PROCESSED BY (Finance Officer):
	Name: _____ Refund No: _____
	Signature: _____ Date: / /