

Refund Request Form

Section 1: Student Details

Date			
Full name		Student ID	
Email contact			
Phone contact			
Course Title/Code			
Enrolment Start Date			
Current Status	☐ Enrolled ☐ Withdrawn ☐ Deferred ☐ Cancelled		

Section 2: Reason For Request

Field	Response
Refund Type Requested	☐ Full ☐ Partial ☐ Other (specify)
Amount Requested (AUD)	
Original Payment Method	☐ Bank Transfer ☐ Credit Card ☐ Other
Bank Account for Refund (if applicable)	Name: _____ BSB: _____ Acc. No: _____

Section 3: Refund Details

- ☐ RTO course cancellation
☐ Visa refusal – Before commencement
☐ Visa refusal – After commencement
☐ Withdrawal ≥10 weeks before start
- ☐ Withdrawal 4–10 weeks before start
☐ Withdrawal <4 weeks before start
☐ Other (please explain): _____

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Section 4: Supporting Documents (Attach) Required if applicable

- ☐ Withdrawal Form
- ☐ Proof of Payment
- ☐ Visa Refusal Letter
- ☐ Other (please explain): _____
- ☐ Medical Certificate / Compassionate Grounds

Section 5: Student Declaration

I declare that the information provided above is true and correct. I understand that refunds will be processed according to the RTO's Fees & Refund Policy and may take up to 20 business days. I also understand that submission does not guarantee approval and appeal options are available.

Student Signature	
Date	___ / ___ / 20___

Section 6: Office Use Only

Checklist	Notes
☐ Application Received	Date: ___ / ___ / 20___
☐ Supporting Docs Verified	☐ Yes ☐ No
☐ Logged in Refund Register	By: _____
☐ Eligibility Reviewed by Compliance	☐ Approved ☐ Denied
☐ CEO Authorisation	Name: _____
☐ Refund Processed	Amount: \$_____ Date: _____
☐ Outcome Notified	Date: _____
☐ Appeal Lodged (if applicable)	Date: _____

Please submit this form to Student Services Officer in campus or email to info@innoverse.edu.au