salford college
Your Future, Our Passion

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REFUND REQUEST FORM

Student No:	
Student Name:	
Student Mobile:	
Course:	
Current start date:	Current end date:
Agent:	

Refund Details:

Offshore Visa Refusal ☐   Onshore Visa Refusal ☐   Course Cancellation ☐

Enrolment Withdrawal ☐   Other Reason ☐ *Please specify*:……………………………………..

Total Amount Paid to Salford College…………………………………

*a refund will be processed in accordance with the Bandicoot Group Pty Ltd T/A Salford College Refund Policy

Mode of refund payment (Please select ONLY one)

☐ Australian Bank Transfer (Section 1)   ☐ International Bank Transfer (Section 2)

Name of Account's holder…………….……………………………
Relationship with the Account's holder ☐ **Agent**   ☐ **Relative**   ☐ **Friend**   ☐ **Other……………**

Section 1. Australian Bank Details for Refund:

Bank Name:	Account Name:	
Bank Branch Name:	BSB Number:	Account Number:

Section 2. International Bank Details for Refund:

Swift Code:		
Bank Name:	Bank Address:	
Bank Branch Name:	Account number:	
Account Name:		
Account Holder's address:	Postcode	Country:

Student Acknowledgment:

☐   I understand that my request for a refund will be processed in accordance with the Bandicoot Group Pty Ltd T/A Salford College refund Policy (please see refund policy https://www.salfordcollege.edu.au/fees-refunds/)

☐   I understand that any potential refund will be transferred to the account holder indicated above

Student Signature: ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯   Date Submitted: ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

Form Received by: _____   Date Received: _____

ACCOUNTS		Staff Member:		Date:
Course/Units	**Amount Received ($)**	**Deduction ($)**	**Reason**	**Refund Amount**
Less Application Fee:				
		Total Amount of Refund:		

MANAGEMENT   Authorised Staff: ……………………………….   Date: …. / ….. / …..

Refund Approved?   YES ☐   NO ☐   Adjusted to:………………………………

Notes: ...……………………………………………………………………………………………………..

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Refund Method is:

☐ EFT/CC   ☐ Cheque   ☐ Credit to Students directly on Salford College Ongoing Account

Refund Payable to: ☐ Student   ☐ Agent

ADMIN PROCESS   Staff Member:……………………………………………   Date: ….. / ….. / …..

Student Notified about Form Received: ☐   Date: ….. / ….. / …..

Student Notified about Outcome: ☐

Logged on EDB: ☐

Logged on Wisenet: ☐

Notes: ..……………………………………………………………………………………………………..

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