



Refund Request Form

Refund No:

Section 1 – Student Details

Name:		Date:	/ /
Student No:		Mobile:	
Email:		Address:	
Course Name:		Start Date:	/ /

Section 2 – Refund Details

I request refund for the following:

Amount:	AUD \$
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Reason for refund: (Please attach any supporting documentation)

- VR - Initial Visa Refusal (Full Refund minus the application fee)
- W10 - Withdrawal more than 10 weeks prior to course or semester commencement (70% Refund minus the application fee)
- W4 - Withdrawal 5 or more weeks prior to course or semester commencement (50% Refund minus the application fee)
- W0 - Withdrawal less than 5 weeks prior to course or semester commencement (No Refund)
- WA - Withdrawals after the course or semester commences (No Refund on Current Semester Fee)
- CAN - Course cancelled or rescheduled by OPIE (Full Refund)
- CD- Course discontinued and not delivered in full by OPIE (Refund of the unused tuition fee)
- VER-Visa Extension Refused (No Refund)
- Other reason with evidence

Please state why you wish to apply for a refund. Don't forget to provide evidence to back your claim:

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Acknowledgement: I understand that my request for a refund will be processed in accordance with the OPIE Refund Policy.

Bank Details of Student (Please enter your bank account details in which you would like to receive your refund)

Swift Code:			
Account Number		BSB:	
Account Name:			
Signature		Date:	/ /



IF APPLICANTS IS UNDER 18 YEARS OF AGE	
Contact Details of Parent/ Legal Guardian	
Relationship to the Applicant	
Phone Number	
Email	
Signature of Parent/ Legal guardian	
Print Name & Date	
Office Use (Staff Only)	
Section 3 – Authorization	
Please tick the type of Refund:	
<input type="checkbox"/> Withdrawal	<input type="checkbox"/> Cancellation
<input type="checkbox"/> Transfer	<input type="checkbox"/> Other (please specify)
This Refund is:	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED
<input type="checkbox"/> ADJUSTED TO AUD \$	
Comments:	
Total Amount of Refund	
AUD\$	

Refund Method is:			
<input type="checkbox"/> EFT / CC	<input type="checkbox"/> Cheque	<input type="checkbox"/> Credit to Student’s Ongoing Account	
Refund payable to	<input type="checkbox"/> Student	<input type="checkbox"/> Agent	
Signed:		Position:	
Print Name:		Date Processed:	
Admin Use Only			
Recorded in student file	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date: / /
Recorded by:		Signature:	
Admin Signature		Date:	