



REFUND REQUEST FORM

Please choose one option:

Refund to be made directly to the student:

Refund to be made directly to the agent:

PLEASE READ THE REFUND POLICY BEFORE COMPLETING THIS FORM

SECTION A – PERSONAL DETAILS

Student Details

Given Name/s Surname

Student ID DOB (DD/MM/YYYY)

Address

Mobile Email

SECTION B – REQUEST

Course Code Course Name

Tuition fee paid \$

SECTION C – REASON FOR REQUEST

This process should not begin until a Refund Request form has been completed and submitted along with all supporting documents.

- Visa Rejection (please attach original DIBP rejection letter)
- Release Request
Please attach offer letter and confirmation of enrolment (CoE) Also attach the receipt of course fees paid. A student cannot change provider within the first six months of the principal course without a letter of release from SCA.
- Changed Visa Status
Please attached certified copy of new visa stamp of effective date.
- Other Reason _____

Refund won't be processed without supporting documents

- Excess Payment

CHECKLIST for STUDENT

- Original DIBP rejection letter (Visa Rejection)
- Copy of Offer Letter or CoE from the new provider (Release request)
- Copy of new visa (Changed Visa Status)
- Flight tickets (Other reason)
- Medical Certificate (Other reason)
- Proof of receipt (Excess payment)

Important Information

If you are returning home, SCA may access Visa Entitlement Verification Online (VEVO) to check the status of your student visa and confirm your location prior to processing the refund.

SECTION D – BANK DETAILS

Please fill bank details clearly in **BLOCK** letters.

Bank Name Account Name

BSB Number (Australian Bank) SWIFT Code
(overseas bank)

Account Number IFSC Code (India only)

Bank Address

Administration fee of \$250 will be deducted from your upfront tuition fee and only upfront tuition fee will be refunded subject to SCA refund policy.



SECTION E – STUDENT DECLARATION

I acknowledge that:

- all information provided within this 'Refund Request Form' is correct and that I have read and understand and agree to be bound by the SCA Refund Policy.
- this form will be processed within 4 weeks (28 days) only after I have supplied all relevant documents.
- this request of refund will be assessed in accordance with the refund policy stated in the student written agreement which I have read, agreed and signed at the time of my enrolment.
- I understand that SCA may access VEVO to determine my location and visa status if I have advised I am returning home.

Signature: Date (DD/MM/YYYY):

OFFICE USE ONLY

Refund Application Decision Record – SCA Management to complete

- Approved Full Refund – 100% of Tuition Fee and other Student Fees except the Enrolment Fee.
- Approve Partial Refund % of Tuition Fee and other Student Fees except the Enrolment Fee.
- Declined – No refund – Reason:

Principal Signature Date Signed

SECTION F – REFUND CALCULATION TABLE

Admissions Officer to complete

| Fee Type | Amount Received | Date Received | Approved Refund% | Refund Amount |
|-----------------------|--|---|--|---|
| Tuition Fee | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> |
| Material Fee | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> |
| OSHC | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> |
| Airport pick-up | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> |
| Others | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> | <input style="width: 100%; height: 25px;" type="text"/> |
| Less Bank Charges | <input style="width: 95%; height: 25px;" type="text"/> | | | |
| Total Amount Received | <input style="width: 150px; height: 25px;" type="text"/> | Total Refund Amount Payable | <input style="width: 150px; height: 25px;" type="text"/> | |

Prepared by Recorded on Wisenet

SCA Staff Signature Date Processed

SECTION G – REFUND PAYMENT RECORD

Finance Officer to complete

Paid Amount Bank Transaction ID

Date of Payment Payment Prepared By

- Recorded on Wisenet Funds transfer receipt and a copy of this form sent to student/agent