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**Application for Refund**

|  |  |
| --- | --- |
| Name: |  |
| Contact number: |  |
| How was the payment made? |  |
| Bank details: |  |
| BSB - |  |
| Account number - |  |
| Credit Card Details: |  |
| BPay - |  |
| Account Number - |  |
| Course title: |  |
| Course Date: |  |
| Invoice number: |  |
| Date refund application submitted: |  |
|  | |
| Reason for application (required if 3 business days or less notice has been given): | |
|  | |
|  | |
|  | |
| Acceptable reasons may include:  • sickness (verified by a medical certificate)  • change of employment hours or location (verified by employer)  • bereavement | |
| Please list documentation provided (required if 3 business days or less notice has been given): | |
|  | |
|  | |

*Your request will be responded to within 2 business days.*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Office use only*** | | | |
| Refund approved / not approved | | | |
| Refund amount | $ | |  |
| Date of refund: |  | |  |
| Approved by: (RTO Manager) |  | |  |
|  | |  | |