

REFUND REQUEST FORM

Student Details		Refund Type
Admin Staff		☐ Visa Refusal
Date		☐ Visa Renewal Refusal
Name		☐ Visa Breach of Condition
Student ID		☐ Withdrawal
Course		☐ Transfer
Course Intake		☐ Cancellation

Section 1 — Refund Request

Invoice Number	
Amount	
Reason for Refund (please attach any supporting documentation)	
Please enter your banking information in Section 2.	

Section 2 — Student Acknowledgement

I understand that my request for a refund will be processed in accordance with Skills Click PTY LTD's Refund Policy. I also understand that I shall have 20 working days to access the Complaints and Appeals process, should I not agree with the outcome or decision.

Banking Information for Refund Payment

Account Name	
BSB Number	
Account Number	
Bank Name	
SWIFT / IBAN (international)	
Print Name	
Signature	

Section 3 — Authorisation for Processing

Action to be Taken

☐ Approve
 ☐ Denied
 ☐ Adjusted Amount

Comments

Signed		Position	
Print Name		Date Processed	
Amount to be Refunded			

Admin Use Only

Refund Register

Logged in Refund Register	☐ Yes	☐ No	Date	
Logged By			Signature	

Formal Letter Sent

Formal Letter Sent	☐ Yes	☐ No	Date	
Logged By			Signature	

Appeal of Decision

Appeal Lodged	☐ Yes	☐ No	Date	
CAF Number			Date	