

## **Refund Application Form**

| Student Name                                    |  |     |                 |
|---|--|-----|-----------------|
| Date of Withdrawal                              |  | USI |                 |
| Course  |  |     |                 |
| Email   |  |     |                 |
|   |  |     |                 |
| Enrolment Status                                |  |     | Please tick box |
| I have commenced my course                      |  |     |                 |
| I have not commenced my course                  |  |     |                 |
| I currently owe fees and want them reconsidered |  |     |                 |
|   |  |     |                 |
| Reason for Refund Request                       |  |     |                 |
|   |  |     |                 |
|   |  |     |                 |
|   |  |     |                 |
|   |  |     |                 |
|   |  |     |                 |
|   |  |     |                 |
|   |  |     |                 |
| Student Signature                               |  |     |                 |
| Printed Name                                    |  |     |                 |
| Form Completed Date                             |  |     |                 |

Please provide your completed form to any AEATS representative or email to  $\underline{admin@aeats.com.au}$ 

Your refund request will be considered and responded to (via email) according to: SC5: Fees and Refunds Policy & Procedures.