



# Request for Refund

AA  
FI POL 01a

**SECTION A**

Date of Request: \_\_\_\_\_

Student Number: \_\_\_\_\_ International Student:  Yes  No

Student Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Contact Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

Course Name: \_\_\_\_\_ Date Course Commenced: \_\_\_\_\_

**Reason for Refund** (Attach supporting documentation)

- Falls within the Refund Period as stated in the Refund Policy
- Australian Visa Application Denied
- Serious Medical Condition affecting them or a member of their immediate family
- Bereavement
- Aviation Australia is unable to provide a course offered
- Other Please specify: \_\_\_\_\_

**Bank Account Details for Refund (if issued):**

Bank Name: \_\_\_\_\_ Swift Code: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Account Name: \_\_\_\_\_

BSB: \_\_\_\_\_ Account Number: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION B**

**OFFICE USE ONLY**

- Full Refund
- Partial Refund
- Pro Rata (Aeroskills only)
- Deposit Only
- Administration Fee (if applicable)

**TOTAL AMOUNT OF REFUND:** \_\_\_\_\_

Business Manager Signature (or delegate)  Agreed  Not Agreed

\_\_\_\_\_ Date: \_\_\_\_\_

If not agreed why? \_\_\_\_\_

Financial Controller Signature  Approved  Not Approved

\_\_\_\_\_ Date: \_\_\_\_\_

If not agreed why? \_\_\_\_\_