

Refund Application Form (RAF)



Please Note: Your Application for Refund may take up to 5 working days to be processed.

Student Name:		Student ID:	
Address:			
State:		Postcode:	
Phone:		Email address:	
Course Enrolled in:			
Course Commencement Date:		Course end date:	
Reason for Refund Application:	<input type="checkbox"/> Student Request – refund paid within 28 days <input type="checkbox"/> Student default – refund paid within 28 days <input type="checkbox"/> Stanley College default – refund paid within 14 days		

Refund Calculation Table		
Semester's fees paid		\$
Less: <input type="checkbox"/> Application Fee – generally non refundable		\$
<input type="checkbox"/> Administration Fee – see table		\$
<input type="checkbox"/> Resource material (books, tools, etc.) – deduct only used component		\$
Other expenses (list)		\$
Net semester's fee (Semester's fee paid less expenses)		\$
Refund applied according to policy		\$
Refund for additional semester's fees paid	40% for next semester, 100% any further semester paid	\$
Less: Any outstanding fees and expenses owed to Stanley College	<i>Example: Outstanding fees of previous semester or semester fees not paid in full.</i>	\$
Refund to be paid to Student		\$

Proposed by: Administration Officer Date:

Agreed by: Student Date:

Approved by

CEO:

Date:

Student Declaration

I, _____ (Student Name) have read and understood Stanley College's Refund and Cancellation Policy and will abide by its requirements.

I agree to the refund calculated in the Refund Calculation Table above and have been informed about my right to appeal the calculated amount stated in the above table.

I understand that Stanley College will not transfer any funds to a third party unless I explicitly request it in writing, in which case Stanley College shall be released of any responsibility in relation to the refund, once the funds have been transferred as requested.

Student Name:

.....

Student Signature:

.....

Date:

Administration
Officer:

.....

Signature:

.....

Date:

This Application for Refund Form must be copied and distributed as follows:

Stanley College: Original Copy in student personal file

Student: Photocopy

Office Use Only: Outline action taken and outcome.

Refund process monitoring

Refund (please ✓):

Paid

Not Paid

Date Paid

CEO Approved:

Date:
