

# **Application for Refund**

This form is to be used by overseas students ('students') enrolled at OCT to request a refund in accordance with their Written Agreement. For further information about refunds, please refer to the Fees and Refunds policies and procedures which can be found in your Written Agreement and International Student Handbook.

OCT is collecting personal information requested on this form, including names and contact details and information for the purpose of assessing your request for a refund. Financial information is collected to allow OCT to pay a refund if your application is approved. The information on this form will be made available to employees of OCT involved in processing your refund if your request is approved. The information will not be used or disclosed for any other purpose without your consent unless the use or disclosure is required or authorised by law.

#### Completing and submitting this form

- 1. Please read the fees and refund policy in your Written Agreement and International Student Handbook before completing this form.
- 2. Complete all sections of this form in full.
- 3. This form, along with any appropriate evidence such as a medical certificate, or visa refusal letter, etc. can be delivered in person to the student administration, sent to OCT via email listed below or alternatively, returned by post to:

Student Administration – admin@oct.edu.au

Oceania College of Technology

110 Beaty Road, Archerfield QLD

- 4. Where compassionate or compelling circumstances exist, appropriate evidence must be provided at the time the refund request is made, in order for OCT to consider the position when making an assessment. The CEO will assess compassionate or compelling circumstances at their discretion and on a case-by-case basis where the provisions of the fees and refunds policy do not apply.
- 5. Failure to provide appropriate and correct details or required evidence with this request may result in the refund being delayed, and additional charges may be incurred.

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Pers	sonal details					
Full I	Name:	Click or tap here to enter text.				
Date	of birth:	Click or tap here to enter text.				
Туре	of student:	☐ Domestic ☐ Overseas				
Ema	il:	Click or tap here to enter text.				
Mobi	le:	Click or tap here to enter text.				
Resi	dential Address:	Click or tap here to enter text.				
Post	al Address:	Click or tap here to enter text.				
Cour refur	Click or tap here to enter text.					
Curre	ent Enrolment Status					
□Ih	ave commenced my course	е				
□Ih	ave not commenced my co	urse				
□Іс	urrently owe fees and want	them reconsidered				
Reas	on for Refund Request					
	Visa refusal prior to comm	nencement of the course (a copy of the Visa Refusal letter is required)				
	Withdrawal from the cours Visa Refusal letter is requ	se due to visa refusal after commencement of the course (a copy of the ired)				
	I currently owe fees and w	ant them reconsidered				
	Overpaid tuition fees					
	☐ Withdraw from units or the course of enrolment					
	Your Confirmation of Enrolment is cancelled because we have reported you for breach of your visa conditions, non-satisfactory course progress, non-payment of fees or breach of the student code of conduct.					
	Transferring to another pr	ovider (attach evidence such as COE)				
	Medical reasons (attach s	uitable evidence such as a Medical Certificate)				

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Credit Transfers were approved
Other (including compelling and compassionate circumstances, please state the reasons in the space provided below:
Click or tap here to enter text.

## **Refund Method**

The refunds, if approved, will be paid to the person who originally paid the fees. We cannot transfer funds to any other party. Please note that the beneficiary's name can only be the name of the person who paid the original tuition fees.

\*Unless payment was made by Bank Deposit, EFTPOS and Bank Cheque, refunds must be credited back to the same Credit Card account. Please include a copy of your Credit Card statement as evidence of card details and payment. An online transaction history cannot be accepted as a form of verification. For any other payment method, please supply your bank account details below.

Payment method (select one option and complete the relevant fields that apply)									
	☐ Bank Transfer (Australia): I request that the monies be transferred by EFT into an Australian bank account, the details of which are provided below.								
Account Name:	Click or tap h	nere to enter text.							
Bank Name:	Click or tap h	Click or tap here to enter text.							
BSB Number:	Click or tap here to enter text.	Account Number:	Click or tap here to enter text.						
☐ Bank Transfer account, the detail	•	•	ansferred by EFT into an Overseas bank						
Account Name:	Click or tap h	nere to enter text.							
Bank Name:	Click or tap h	nere to enter text.							
BSB Number:	Click or tap here to enter text.	Account Number:	Click or tap here to enter text.						
IBAN Number:	Click or tap here to enter text.	SWIFT Code:	Click or tap here to enter text.						

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IFSC/Router/BIC code: (if known)	Click	click or tap here to enter text.						
Bank Branch and Address:	Click	lick or tap here to enter text.						
☐ Credit Card: I request that the money be paid to the following credit card.								
Cardholder Name:		Click or tap here to enter text.						
Credit Card Number:		Click or tap here to enter text.						
Credit Card Type:		Click or tap here to enter text.						
Expiry Date:		Click or tap to enter a date.	Signature:					

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## **Conditions for Refund**

- 1. Approval of any refund application will be made in accordance with OCT's Fees and Refunds policy and procedures.
- 2. Any outstanding amounts due to OCT and any applicable costs or charges that may be levied by OCT or the student's bank for receipt of monies refunded will be deducted from the refund.
- 3. The student agrees to repay OCT (on demand) any payments credited to the student in error. OCT reserves the right to offset the amount of any overpayment made in error against any liability (including any future debt) owing to OCT by the student.

#### **Declarations**

- 1. I request a refund of fees paid if eligible and in accordance with OCT's Fees and Refunds Policy and Procedures.
- 2. I understand my rights to appeal against the outcome of this application in accordance with OCT's complaints and appeals policy and procedures.
- 3. I authorise the payment to be made to the person identified in and using the details provided in the refund method section of this form.
- 4. I declare that all information provided in this form is true and correct and that I will notify OCT of any change(s) to the information provided as soon as possible.
- 5. I agree to cover any additional costs incurred as a result of incomplete and/or incorrect information being provided.
- 6. I agree that if I currently have any debts owed to OCT that have not been paid, and if the refund is approved, the monies will be first used to settle the debt, and the remaining balance will be paid to me.

Student Name	Click or tap here to enter text			
Student Signature		Date	l	Click or tap to enter a date.
Office Use Only				
Assessed by:		Position:		
Date received:		Date process	ed:	
Decision:	☐ Approved ☐ Rejected	Refund Amou	ınt:	AUD\$
Details of the refund:				
Reasons for approval or rejection, basis for calculation etc				

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