



REFUND APPLICATION FORM

Please submit your completed form to the institute or forward to info@wic.edu.au

No refunds will be paid to a third party unless it is indicated at the time the refund application is lodged, that any refunds due is payable to a third party. Refunds are processed in line with the Refund Policy. If the application for course amendment is approved by Wells International College, and the student is eligible for a refund, any refunds are processed within 28 days of receiving the written request via the Refund Application Form.

STUDENT DETAILS:

First Name:		Family Name:	
Student ID:		Date of Birth:	/ /
Contact Number:		E-mail:	
Address:			
Original Payment Method:	<input type="radio"/> Credit Card <input type="radio"/> Direct Deposit <input type="radio"/> Other: _____		Payment Date: / /
Reason for Refund:			

(If you require more space please attach a separate sheet. Please include independent, original or certified documentary evidence in your application (e.g. medical certificate))

REFUND PAYMENT DETAILS: Refund will be processed in Australian Dollars.

<input type="radio"/> I Agree for the institute to refund to a third party other than my student personal account.		Requested Amount:	\$
Direct Deposit into Bank Account:	BSB No:		Account No:
	Account Name:		Bank Name:
	Branch Address:		SWIFT Code (Overseas):

the Institute will NOT be held responsible if any of the following details are incorrect. Refund to overseas account will subject to \$50.00 international transaction fee.

STUDENT DECLARATION:

I have read the refund policy and understand the terms and conditions. I am aware of the academic and financial consequences of the above request and have sought appropriate advice on these matters. I understand and agree to be bound by the institution policies and deadlines for the processing of refunds. I declare that the information I have given on this application is correct and understand that by knowingly making false or misleading statements that I may be liable for prosecution. I also authorise the Wells International College to gather and obtain any necessary information pertaining to this application.	
I agree to the conditions of this Refund Application and declare that I am the person to whom this refund is to be paid.	
Student Signature:	Date:



FINANCE DEPARTMENT ONLY

Please be advised that your request for refund of tuition fees has been approved according to the following code.

Course Commencement date:		Withdrawal notification date:		Days of notice provided in writing:	Days
Reasons					
<input type="radio"/> Visa refused prior to course commencement				Full refund less an administration fee of \$200	
<input type="radio"/> Withdrawal at least 28 days (prior to the initial course agreed start date) *				50% refund of tuition fees less an administration fee of \$200	
<input type="radio"/> Withdrawal less than 28 days (prior to the initial course agreed start date) *				No refund	
<input type="radio"/> Withdrawal after the initial course agreed start date*				No refund	
<input type="radio"/> Visa or CoE cancelled due to student breach of their visa conditions or misbehaviour by the student				No refund	
<input type="radio"/> Does not commence (i.e. does not arrive, or has not arranged with us for a later start because of health or compassionate reason)				No refund	
<input type="radio"/> Visa extension is refused after course commencement				No refund	
<input type="radio"/> Withdrawal from any continuing study, including any continuing CoE				No refund	
<input type="radio"/> Compulsory Health Insurance (Student visa holders only) <input type="radio"/> Airport Pick-up <input type="radio"/> Homestay placement fee				Refer to the Terms and Conditions of Third Party Service Providers	
Other Reasons:					
<input type="radio"/> Wrong payment <input type="radio"/> Payment without CoE Issue <input type="radio"/> Others: _____					

Note: Agreed initial course start date is the date indicated on the student’s Confirmation of Enrolment (CoE)

REFUND CALCULATION TABLE:

Tuition Fee Paid:		Application Fee:	– \$200.00
Fee Withheld (50%):		International Transaction Fee:	– \$50.00
Total Refund:			

(AR)Prepared by:		Refund Amount:	\$	Date:	/ /
(AP)Review and Process by:		Date:	/ /	Authorised by:	