

FEE REFUND REQUEST FORM



Complete this form in BLOCK LETTERS.

This form is required by International Student Visa Holders when applying for a refund. Please make sure that you have read and understood all the related policies – the [Fee, Charges and Refund Policy](#) – before submitting this form.

Section 01: PERSONAL DETAILS

Student Name:	<input type="text"/>	*
Student ID Number:	<input type="text"/>	*
Date of Birth:	<input type="text"/>	*
Personal Email Address:	<input type="text"/>	*
Contact Number:	<input type="text"/>	*
Address	<input type="text"/>	
Building / Property Name:	<input type="text"/>	
Flat / Unit Details:	<input type="text"/>	
Street Number and Name:	<input type="text"/>	*
City / Town / Suburb:	<input type="text"/>	*
State / Province:	<input type="text"/>	*
Post code:	<input type="text"/>	*

Section 02: COURSE DETAILS

Course Name:	<input type="text"/>	*
Course Start Date:	<input type="text"/>	*

Section 03: REASON FOR REFUND

Supporting documents/evidence must be attached*. AIA may not be able to process a refund if satisfactory reasons and supporting documentation is not provided.

<input type="checkbox"/> Medical	<input type="checkbox"/> Visa Related
<input type="checkbox"/> Transfer to another provider	
<input type="checkbox"/> Other (please specify):	<input type="text"/>

Section 04: BANK DETAILS

Please fill out this section with the bank details (student or parent) to which the refund must be processed.

Bank Name:	<input type="text"/>	*
Bank Address:	<input type="text"/>	*
IBAN / IFSC:	<input type="text"/>	*
Branch Number / BSB:	<input type="text"/>	*
Account Number:	<input type="text"/>	*
SWIFT Code:	<input type="text"/>	*
Account Holder's Name:	<input type="text"/>	*

Note:

- The student is required to submit an email from their personal email address, along with a handwritten letter authorising the refund to be processed to their parent's account.
- All mandatory fields (*) must be completed. Incomplete submissions will not be processed for fee refund requests

STUDENT DECLARATION

I declare that:

- The information I have provided is correct.
- The documents provided are genuine.
- All supporting documents are provided with this Form.
- I acknowledge that refunds will only be processed to my own bank account or that of my parents, subject to submission of an email from my registered email address and a handwritten letter authorising the refund.

I am aware that:

- I am subject to the Analytics Institute of Australia [Fees, Charges and Refund Policy](#) and the approval of a release letter request does not constitute a guarantee of refund for any payments made to the Analytics Institute of Australia.

Student Signature:

Date:

PRIVACY STATEMENT

Analytics Institute of Australia collects personal information about you for the purposes of administering your enrolment in your chosen education course(s) or unit(s) of study. We may not be able to process your request if you do not provide all the information requested on this form. We may disclose personal information about you in accordance with our Privacy Policy including to your education agent, and to the Australian government as required or authorised by law. Our Privacy Policy contains detailed information about how you can access and correct the personal information we hold about you or make a privacy complaint.

FOR OFFICE USE ONLY

Refund Request

Granted

Declined

If Granted

Note: Please refer to Fee Refund policy for applicable criteria

Eligibility

Full Refund

Amount: AUD\$

Partial Refund

Amount: AUD\$

Applicable Criteria

Refund by (date)

If Declined

Notify student

Reason(s) for decision:

If Approved

Approver's Name:

Approver's Signature:

Date: