Refund Application Form

Student Name:		Student ID:	
Course:			
Student Address:			
Date Of Birth		Contact Number:	
Email Address:			
Date of Withdrawal (if applicable):			

Enrolment status	Please tick box
I have commenced my course	☐
I have not commenced my course	☐
I currently owe fees and want them reconsidered	☐
Reason for refund request (*This application must be supported by additional documents that can be verified*):	
Student Signature:		Date:	

For more information on refund policies, please refer to our website: www.brighton.edu.au

Deposit Account: You must write SWIFT code for overseas payment			
Bank Name:		Country:	
Account Name:*		SWIFT Code:	
BSB: (if required)		Account Number:	
I authorise refunded amounts to be deposited into the above nominated account.			
Student Signature:		Date:	

*If the account holder's name is different from student's name, documents to support the relationship must be provided.

Please return completed form to the emails of our Melbourne or Brisbane offices listed on the next page.

Refund Application Form

RETURN COMPLETED FORM TO	
Brisbane students StudentSupport-BNE@brighton.edu.au	**Melbourne students** StudentSupport-MEL@brighton.edu.au

OFFICE USE ONLY			
Received by:		Date:	
Decision outcome (please tick):	☐ Approved ☐ Declined		
Reason (s) for outcome:			
Refund Amount:		Refund Method:	
Approved by:		Processed by:	
Signature:		Student notified on (Date):	