



Course name	
Full name	
Residential Address	
Contact phone numbers	
*Date of Birth	
*Student ID	
Email address	

*Is mandatory

Reason for refund application

Please attach necessary documents. Without the supporting documents a refund will not be processed.

All fields must be completed to ensure your refund is processed in a timely manner.

Please fill the below Bank details for refund (for Australian Bank Account)

Account Name.....Bank Name:
BSB Account Number

Please fill the below Bank details for refund (International Bank Accounts only)

(Please fill the below in CAPITAL LETTERS only)

Bank Name
Bank Address
Account Holder name
SWIFT CODE IFEC.....
Account No BSB No.....
Amount Deposited: Date Deposited:

I have accessed the refund policy of the college and have understood my obligations.

Student signature	
Date	

This form must be used by students applying for refund application and addressed to the College admission team. If refund application is lodged in any other way the applicant will be contacted by the college and required to complete the Student refund application form. Please email this form directly to **admission@coe.vic.edu.au**