

F12 REFUND REQUEST FORM

| Student Details: | | | |
|---|---------|------|--|
| Student Name | | | |
| | | | |
| Student ID | | | |
| | | | |
| Course Name | | | |
| Course Start Date | | | |
| Course Start Date | | | |
| Refund details: (Note: Please provide the relevant documents as evidence to support your request for | | | |
| refund. Evidence may include: Evidence of visa cancellation/refusal/withdrawal/change to visa subclass or conditions or other and the ticket to your home country.) | | | |
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| | | | |
| Bank Transfer (Please enter your bank account details in which you would like to receive your refund) | | | |
| Bank Name | | | |
| Bank Branch | | | |
| Account Name | | | |
| BSB | | | |
| Account Number | | | |
| Swift Code | Country | | |
| Switt Code | Country | | |
| | | | |
| Student's Declaration | | | |
| ☐ If account information other than mine, I authorise the above-mentioned account holder to receive the | | | |
| refund on my behalf. | | | |
| ☐ I understand that my request for a refund will be processed in accordance with QCVE's Refund Policy. | | | |
| ☐ I also understand that I shall have 20 days to access the Complaints and Appeals process, should I not | | | |
| agree with the outcome or decision. | | | |
| Student Signature | | Date | |
| | | | |
| | | | |
| For Office Use Only | | | |
| Request Received by | | Date | |
| mequeet meetines z, | | 2000 | |
| | | | |
| Refund Applicable: | | | |
| | | | |
| Refund processed by | | Date | |
| Refully processed by | | Date | |