

Personal and Contact Details

Student Number:				
Surname:		First Name:		
Street Address:				
Suburb:				
Home Phone:		Mobile Phone:		
Email Address:				

Enrolment Details

Qualification:				
Unit/s of Competency:				
Delivery Method:	Classroom	Self-paced	Workplace	
Payments:	Upfront (full payment)	Payment Plan	Employer	Other

Refund Request details

If you intend on applying for a refund following your withdrawal from training please read ET Australia's Refund Policy. The policy will confirm if you will be eligible for a refund and what type of refund you should be applying for based on your circumstances.

Please complete the Withdrawal Form prior to completing this form.

<input type="checkbox"/> Standard Refund:	I am withdrawing my enrolment prior to training commencement
<input type="checkbox"/> Extenuating Circumstances Refund:	I meet the following criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Medical reasons <input type="checkbox"/> Financial hardship <input type="checkbox"/> Employment changes <input type="checkbox"/> Family / personal reasons
What form of evidence have you attached to support this refund application	<ul style="list-style-type: none"> <input type="checkbox"/> Medical certificate / correspondence <input type="checkbox"/> Employer letter <input type="checkbox"/> Counselling letter <input type="checkbox"/> Other

Student Signature:	
Date:	

OFFICE USE ONLY

Amount Paid to Date:	
Number of units commenced:	
Number of units not commenced:	

Application Approved:	<input type="checkbox"/>
Date:	
Approved by :	
Signature:	

Application Denied:	<input type="checkbox"/>
Date:	
Reviewed by :	
Signature:	

Amount to be refunded:	\$
Reason for decision:	