



Student Refund Application Form

Please select the applicable Registered Training Organisation

Everthought College of Construction (RTO Code: 51681 CRICOS Code: 02898C) Everthought Education (RTO Code: 32438)

Student Details						
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Mrs	<input type="checkbox"/> Dr	<input type="checkbox"/> Other
Given Name			Surname			
Email address			Phone number			
Student Number			<input type="checkbox"/> Domestic	<input type="checkbox"/> International		
Postal Address						
Suburb:			State:			Postcode:
Course						

Reason for Refund Request *(Include documentary evidence to substantiate your claim where relevant)*

Note: All refunds are subject to the terms and conditions outlined in the Everthought Education and Everthought College of Construction, Domestic Student Refund Policy and International Student Refund Policy as presented to the students via student handbook at the time of enrolment. Lodging a refund application does not automatically imply that a refund will be granted. Each refund application will be individually assessed for eligibility.

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Bank Details to Deposit Refund

Note: Refunds will only be paid via electronic transfer. Please nominate an authorised account for deposits. Also, please note the person/company who paid the fees will receive the refund only.

Bank Name			Account name		
BSB			Account Number		
Country					
Overseas Bank Account	SWIFT code:				
	IFSC code (India only):				
	IBAN Number (EU countries):				

**Acknowledgement**

I declare that the information I have provided is true and complete and that it is my responsibility to provide the necessary documentation to support my application.

Student Signature		Date	
<i>(If student is younger than eighteen (18) years of age and is in the care and control of a parent or guardian)</i>			
Parent/Guardian Name			
Parent/Guardian Signature		Date	

For Office Use Only**General Manager or Delegated Person**

Name			
Application approved	<input type="checkbox"/> Yes		<input type="checkbox"/> No
If no, provide reason			
Signature		Date	

Administration

Name			
Student Notified	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Signature		Date	