

Refund Application Form

| | | | |
|---|--|----------------------|-------------------|
| Student Name: | | | |
| Student ID: | | Date of Birth | |
| Course Name: | | | |
| Start Date: | | | |
| Student Declaration | | | |
| I have read and understood Stanley College's Refund Policy. | | | |
| I have received the details about how my Refund has been calculated and agree to the refund calculated. I understand that I have the right to appeal the calculated amount. | | | |
| I understand that Stanley College will not transfer any funds to a third party unless I explicitly request it in writing, in which case Stanley College shall be released of any responsibility in relation to the refund, once the funds have been transferred as requested. | | | |
| Name: | | | Signature: |
| Date: | | | |
| Australian Bank Account (please provide the following details) | | | |
| Account Name: | | | |
| Account Number: | | | |
| BSB Number: | | | |
| Bank Name: | | | |
| International Bank Account (please provide the following details) | | | |
| Account Name: | | | |
| Bank Account/IBAN: | | | |
| SWIFT Code: | | | |
| Bank Name: | | | |
| Bank Branch: | | | |
| Bank Address: | | | |
| Country of Bank: | | | |
| Preferred Currency: | | | |
| Overseas Address: | | | |

*Please note that international payments are processed through Western Union and may take up to 10 working days to be received