



ST JOHN'S ANGLICAN COLLEGE

INTERNATIONAL STUDENT REFUND FORM

International Student Program

Please read the Refund Policy before filling out this application form to request a refund. The Refund Form and refund Policy can be accessed on our website: <https://stjohnsanglicancollege.com.au/international-college-policies/>.

Please note: Please tick ✓ to indicate you have read and understood the following:

- Fee refunds will be provided in accordance with the College's Refund Policy and Procedure
- You should read the policy carefully to establish your eligibility for a fee refund
- Before your application for a fees refund will be considered, you must complete all the sections below and attach required documents relevant to your application

Contact Details			
Student Name			
Year/Elicos Level			
Current Address in Australia			
Address in home country			
Phone No:		Mobile Phone No:	
Email Address:			

Please indicate below the reason for the refund (Please tick ✓):

- Withdrawal from the Course
- Cancellation of Enrolment
- The College cancels the course or unable to provide the course
- Other (Please specify): _____

Account Details for the refund

Mr / Mrs / Ms:			
Address:			
Country:		Postcode:	
Telephone (Country Area Code if applicable)		Mobile (Country Area Code if applicable)	
Email Address:			
Payment Details			
Name of Bank:			
Account Name:			
Account Number:			
BSB Number:			
Swift Code (If not in Australia):			

The completed form can be emailed to info@sjic.qld.edu.au or given to the Head of International College, Ms Shirley Sun at the International Office on Level 1 of the College.

Student Declaration

I declare the information provided in this application is true and correct and I have read and understood the information regarding the Complaints and Appeals Process of the College.

_____ Student Name	_____ Student Signature	_____ Date
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Office Use Only

Refund: **Approved** **Not Approved**

Comments: (if applicable):

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Received: _____ **Date:** __/__/__

Processed by: _____ **Date:** __/__/__

Staff Signature: _____ **Date:** __/__/__