

**DI-FM827**

## Application for Refund

This form should be used in consultation with the Fees & Refunds Policy & Procedure available on Delta Institute's website and in the Student Guide. Refunds will be assessed in accordance with this policy. Students who meet the refund criteria should email this form to [course@deltainstitute.edu.au](mailto:course@deltainstitute.edu.au)

A response will be given to you within 10 business days and if successful a refund will be made as per the Refund Policy, depending on the circumstances.

SECTION 1 – Personal Details		
First Name:		
Last Name:		
Date of Birth:	dd/mm/yyyy	
Student ID:		
Street Address:		
Postal Address:		
Email:		
Contact Number:		
SECTION 2 – Payment Details		
Payment details (if EFT refund required): BSB: _____ Account No: _____ Account Name: _____		
SECTION 3 – Course Details		
Course Code:		
Course Title:		
SECTION 4 – Refund Amount		
Amount Claimed:	\$ _____	
SECTION 5 – Reason for Refund Application (please make sure you have read and understood the Fees & Refund Policy. Refunds will be issued in accordance with this policy). Please tick one:		
<input type="checkbox"/> Withdrawal from current enrolled course	<input type="checkbox"/> Course withdrawn	
<input type="checkbox"/> Withdrawal from future scheduled course	<input type="checkbox"/> Course unable to be provided	
<input type="checkbox"/> Overpayment of course fees	<input type="checkbox"/> Other (please describe)	
SECTION 6 – Declaration		
I declare that the information provided by me is true and complete and that it is my responsibility to provide all necessary documentation to support my request for refund. I agree and have read and understood the Fees & Refund Policy.		
Signature:	Date:	
To lodge the form or to ask any questions in relation to this form please email: <a href="mailto:course@deltainstitute.edu.au">course@deltainstitute.edu.au</a>		
SECTION 7 – OFFICE USE ONLY		
Received by:	Refund Number Issued:	Authorised by:
Outcome:	Date if Refund issued:	Amount: