

REFUND APPLICATION FORM

Note: All refund requests are subject to the provisions outlined in the KING'S Refund Policy and Procedures. Students are advised that lodgement of this form does not guarantee that a refund will be granted. Please ensure all required information is completed correctly and attached to minimise delays.

1. Student details			
Family name <i>(as shown in the passport)</i>			
Given name(s) <i>(as shown in the passport)</i>			
Student number:			
Email address:			
Home phone:		Mobile phone:	
Have you commenced your course: <input type="checkbox"/> No <input type="checkbox"/> Yes			
2. Course details			
Course name:			
Course start date <i>(dd/mm/yyyy)</i>		Total fees paid (in AUD)	
3. Reason for refund request			
Genuine Temporary Entrant (GTE) refusal <input type="checkbox"/>		Family, personal, medical or financial reasons <input type="checkbox"/>	
Student visa refusal <input type="checkbox"/>		Termination/cancellation/withdrawal of enrolment <input type="checkbox"/>	
College default <input type="checkbox"/>		Other:	
4. Preferred refund payment method (please complete ONE of the following options)			
Option 1 – refund to an Australian bank account (refund payable to the original payee's bank account)			
BSB		Account number	
Account name		Bank name	
Attach required documents			
<input type="checkbox"/> Copy of government issued photo ID (eg, passport or driver's licence) <input type="checkbox"/> Evidence of payment to prove where a bank account is named as the payer of the initial payment.			
Option 2 – refund to an overseas bank account (refund payable to the original payee's bank account)			
Account name		Bank name	
Account number			
Beneficiary address			
City	State	Postcode	Country
Bank address			
City	State	Postcode	Country
SWIFT code		IBAN (if applicable)	
Attach required documents			
<input type="checkbox"/> Copy of government issued photo ID (eg, passport or driver's licence) <input type="checkbox"/> Evidence of payment to prove where a bank account is named as the payer of the initial payment.			

5. Family member payment authorisation form (required only when banking details provided for a refund belong to a family member)	
Relationship to the student: Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Spouse <input type="checkbox"/>	
Family member name:	
Date of birth (dd/mm/yyyy)	Nationality
Australian citizen <input type="checkbox"/> Please provide a copy of one of the following: Birth Certificate <input type="checkbox"/> or Passport <input type="checkbox"/>	
Not an Australian citizen <input type="checkbox"/> Please provide a copy of the passport	
Attach required documents	
<input type="checkbox"/> A copy of relationship certificate for family member <input type="checkbox"/> Copy of government issued photo ID (eg, passport or driver's licence) <input type="checkbox"/> A payment evidence to prove where a bank account is named as the payer of the initial payment.	
6. Conditions of refund	
<input type="checkbox"/> All refunds will be processed in accordance with the KING'S Refund Policy and Procedure and will be paid within 14-28 days (depending on the reason for the refund). Please ensure all required information and supporting documentation is provided to prevent payment delays. <input type="checkbox"/> Any outstanding debts owed by the student, and applicable credit card charges from the original fees payment, will be deducted prior to a refund payment. <input type="checkbox"/> All refunds will be paid via electronic funds transfer (EFT) and will be calculated and refunded in Australian dollars. If your local bank does not accept Australian dollars, the refund will be paid in US dollars. <input type="checkbox"/> Please be aware that your bank may deduct banking transaction fees, which could affect the final amount you receive. <input type="checkbox"/> The College reserves the right to terminate or suspend EFT or Telegraphic Transfer payments if the bank details are incomplete or incorrect. <input type="checkbox"/> The above-named Student/Family Member agrees to repay to the College on demand any payments credited to the Student/Family Member in error. The College reserves the right to offset the amount of any overpayment made in error against any future debt or liability owed to the College by the Student/Family Member. <input type="checkbox"/> Refunds will be paid into the same account as was used to make the original payment, unless you authorise a third party transfer in Section 5 above. <input type="checkbox"/> Please ensure that you fill out this form carefully, as providing incorrect details may cause your refund to be delayed and may be subject to additional transaction fees.	
7. Declaration – please select ONE of the options below, as applicable	
Option 1: Student declaration	
I have read, understood and agree with the KING'S Refund Policy and Procedures and the above conditions of refund and declare that I am the person to whom this refund is to be paid.	
Student signature:	Date:
Option 2: Authorisation to pay refund to family member (refund to be paid to someone other than the student)	
I authorise KING'S to pay this refund to the person whose account details are listed in section 5. I have read, understood and agree with the KING'S Refund Policy and Procedures and the above conditions of refund and I understand this refund will not be paid directly to me.	
Student signature:	Date:
I have read, understood and agree with the KING'S Refund Policy and Procedures and the above conditions of refund	
Family member signature:	Date:

8. How to submit your Request for Refund Form

Please email your completed and signed Request for Refund Form, together with any supporting documents, to the relevant email listed below;

info@kings.nsw.edu.au (Student Support Team)

PRIVACY COLLECTION STATEMENT

King's School of Culinary Arts (KING'S) collects, uses and discloses the personal information required by this form for the purpose of processing your refund request. If the personal information you provide to KING'S is incomplete and/or inaccurate, KING'S may be unable to process your request. By completing and submitting this form, you agree to KING'S collecting, using and disclosing your personal information to KING'S.