SYDNEY POLYTECHNIC INSTITUTE

Level 4, 191 Thomas Street Haymarket NSW 2000
Phone: 02 9055 8558 **Email:** admissions@spi.nsw.edu.au **Website:** www.spi.nsw.edu.au **ABN:** 89 640 503 162 **Provider ID:** PRV14354 **CRICOS Provider Code:** 04090E

Refund Request Form

This form is to be filled out and submitted in person to Student Services or online at finance@SPI.nsw.edu.au by the student who wishes to have their pre-paid tuition fees refunded.

Students are advised to read through the SPI Tuition Fees Payment and Refund Policy carefully.

In addition to this, international students are advised to make themselves familiar with the Education Services for Overseas Students Act 2000 for information regarding their rights and responsibilities.

For assistance, please contact SPI Student Services.

Section A: Student Details

Student ID no.:	
Family Name:	Given Name:
Date of Birth (dd/mm/yyyy):	Gender: ☐ Male ☐ Female ☐ Other
Mailing Address:	
Email:	
Home number:	Mobile number:

Course Name:	Course Code:

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Section B: Refund Request

Reason for Refund (Tick the Box):
☐ Visa Rejection
☐ Transfer to Another Institution
☐ Other (Please Specify):

Supporting Documents:
☐ Visa Rejection Letter
☐ Letter from the Accepting Institution
☐ Student Letter
☐ Other (Please Specify):

Section C: Bank Account Details

Account Name:
Swift Code:
Bank Code (BSB):
Account Number:

Overseas Bank Address:
Relationship of Bank Account Holder to Student (If Different):

Section D: Student Declaration

I understand and agree to the following conditions,

- I declare that all the information on this form is correct and complete in every detail and understand the inaccurate information I provided could lead to non-acceptance of my application.
- I authorise SPI to obtain further supporting information or official student records from any other institutions where necessary in regard to my application.
- I have read SPI's *Tuition Fees Payment and Refund Policy* and *Student Deferral, Suspension and Cancellation Policy,* and understand that the changes to my enrolment may result in a change of CoE or the status of my student visa.
- I acknowledge and agree that SPI would use my information where necessary based on SPI's *Record and Information Management Policy*.

Signature of Student	Date (dd/mm/yyyy)

Section E: Office Use Only (Departmental Approval)

Received by:	Received date:

Assessment Outcome ☐ Accepted ☐ Rejected
Refund Amount (AUD): $

Additional Comment:

Approved by: _____

Signature of Staff	Date (dd/mm/yyyy)