

Application for Refund

Application for Refund			
<p>Each refund request is reviewed on a case by case basis. The form is lodged with the Administration Officer according to the Refund Policy.</p> <p>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.</p>			
Applicant/Student's Personal Details			
Family Name:		Given Name(s):	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth: (dd/mm/yy): ____/____/____	
Student ID No:			
Postal Address:			
Home phone: ()		Fax: () Email address:	
Payment details:			
Payment details (if EFT refund required): BSB: _____ Account No: _____ Account Name: _____			
Course details			
Code: _____ Title: _____			
Amount Claimed: \$ _____			
Reason for Refund (please tick)			
<input type="checkbox"/> Withdrawal from current enrolled course <input type="checkbox"/> Withdrawal from future scheduled course <input type="checkbox"/> Overpayment of course fees		<input type="checkbox"/> Course withdrawn <input type="checkbox"/> Course unable to be provided <input type="checkbox"/> Other (please describe)	
Requests for refunds are assessed in accordance with the Refund Policy. Please ensure you have read and understood the Refund Policy located in the Student Handbook or on our Website.			
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 Refund Policy.			
Signature		Date	/ /
To lodge the form return to: Cobra Training on email address: VIC email training@cobra1.com.au phone 1300 262 721. If you have any questions in relation to completing this form, please contact us on the above numbers applicable to your state.			
OFFICE USE ONLY			
Received by:	Refund Number Issued:	Authorised by:	
Outcome:	Date if Refund issued:	Amount:	