

## Refund Application Form

Note: Application for a refund must be made by completing the Refund Application Form and submitting it to AIPT's Finance Department. The form can be obtained from the Institute's website and should be submitted either in person at the reception or by sending an email to [admin@theaipt.edu.au](mailto:admin@theaipt.edu.au) Attention to "Finance Department."

The Institute will evaluate the refund application and determine whether the student is eligible for a refund. Regardless of the outcome, the student will receive written notification within 20 working days of the refund application's receipt. The notification will include an explanation of how the refund amount was calculated. The refund will be issued to the student directly, or to a person designated in writing by the student. If the application is withdrawn or cancelled, the student must provide notification by submitting a "Cancellation Form." Please note that any refunds mentioned in the table below do not include the non-refundable administration/enrolment fee, which is required at the beginning of the course. This fee is mandatory and covers all administrative processes related to enrolment.

<input type="checkbox"/> Domestic Student	<input type="checkbox"/> International Student
<b>STUDENT DETAILS</b>	
Family name:	Given name:
Student ID:	Date of Birth:
Student email address:	Mobile No:
<b>TUITION FEES REFUND COURSE DETAILS</b>	
<input type="checkbox"/> BSB80120 Graduate Diploma of Management (Learning)	
<input type="checkbox"/> BSB50820 Diploma of Project Management	<input type="checkbox"/> BSB60720 Advanced Diploma of Program Management
<input type="checkbox"/> CHC30121 Certificate III in Early Childhood Education and Care	<input type="checkbox"/> CHC50121 Diploma of Early Childhood Education and Care
Has the course already been commenced?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Course commencement date:	
<b>REASON FOR REFUND REQUEST (Evidence to be attached)</b>	
<input type="checkbox"/> Course cancelled or rescheduled by AIPT (Provider default)	<input type="checkbox"/> Leave of absence
<input type="checkbox"/> Family/Personal/Financial Reasons	<input type="checkbox"/> Failure to meet English Requirement
<input type="checkbox"/> Medical Reasons	<input type="checkbox"/> Refused student visa
<input type="checkbox"/> Study at another registered provider	<input type="checkbox"/> Domestic Student Withdrawal
<input type="checkbox"/> Other compassionate and compelling circumstances (Please specify):	
<b>BANK DETAILS FOR DEPOSIT OF REFUND (If approved)</b>	
<input type="checkbox"/> Electronic Funds Transfer (EFT) - Australian bank account	
Account Name:	Bank Name:
Account Number:	BSB:
<input type="checkbox"/> Credit Card details for refund	
Card Holder's Name:	Expiry Date:
Card Number:	CVV:
<input type="checkbox"/> Overseas Telegraphic Transfer - overseas bank account	
Account Holder's Name:	Bank Name:
Account Number:	
Account Holder's Address:	
Bank Address:	
SWIFT code:	IFSC code: (India only)
IBAN Number: (EU countries)	

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DECLARATION			
<input type="checkbox"/> I have read and fully understood the Refund Policy. <input type="checkbox"/> I understand that completing this form does not guarantee a refund. <input type="checkbox"/> I authorise AIPT to pay my refund to the nominated Bank Account as specified in this form. I understand that the accuracy and legibility of the provided banking details are my sole responsibility. <input type="checkbox"/> I declare that the above information is true and correct. I acknowledge that withholding relevant information or providing incorrect information may delay the processing of the application. <input type="checkbox"/> I declare that the information I have provided on this form is true and complete and that it is my responsibility to provide the necessary documentation to support my application.			
Student Signature:		Date:	
FOR OFFICE USE ONLY			
Date of Submission:	Staff name:	Staff signature:	
Students' education agent notified: <input type="checkbox"/> Yes <input type="checkbox"/> No		Date notified:	
Application approved: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If not approved, why?			
Name:	Position:	Signature:	Date:
Further Comments:			