

106-FM-MEGA Fee Refund Form

Relevant Standards

SRTOs 2015: 5.3, 7.3
The National Code 2018: Standard 2, 3

Linked Documents

Student Fess Policy
Fee Refund Policy and Procedure
Student Agreement

Student to complete the following sections:

Note: Please make sure that you have read and understood all the related policies – in particular the **Fee Refund Policy** – before submitting this form

Student ID (if Given)				
Student Name				
Enrolled Course(s) <i>(Please list all the courses you are enrolled in)</i>	Course Code		Title	
	Course Code		Title	
	Course Code		Title	
Full Address				
	Country		Postcode	
Reason(s) for Request for Refund. Please completed details: <i>(Please also attach supporting documents as required. MEGA will not be able to process the refund application if supporting documents are not provided)</i>	Medical			
	Visa related			
	Transfer			
	Other			

Bank Account Details for Electronic Refund	Bank Name		Branch Number/BSB	
	Account Name		Account Number	
	IBAN		SWIFT Code	
	Beneficiary Address (IMT only)			
Declaration: 1. I have fully read and understood MEGAs refund policy and understand that the refund can only be made to myself or to another person authorised by me in writing; and 2. I will have no further claim against MEGA once the refund has been paid.				
For over 18 years old Student Declaration and Signature:	Signature:			Date:
For under 18 years old Guardian's Name and Signature:	Name of Guardian:			Date:
	Signature of Guardian:			

For OFFICE use only

Process Flow: >>Student Admissions >>Finance >> CEO >>Response to the Student

Refund Request:	☐ Granted		☐ Declined	
If Granted: Note: Please refer to <i>Fee Refund Policy</i> for applicable criteria	Eligibility	☐ Full Refund	Amount: A\$	
		☐ Partial Refund	Amount: A\$	
	Applicable Criteria			
	Refund by:	Date:		
If Declined: <i>Notify Student</i>	Reason(s) for decision:			
Approved by:	Name:	Signature:		Date: