

**STUDENT DECLARATION AND REQUEST FOR REFUND OF FEES
AUSTRALIAN PACIFIC COLLEGE ("APC")**

Name: _____
SID: _____ Date of birth: _____
Course studied: _____
Reason for withdrawal: _____
Student's address¹: _____
Parent's Names²: _____
Parent's Address³: _____

</we> the <student/student and parent> have applied for a refund and if <my/our> application is successful </we> do solemnly declare that </we> give permission for <my/our> refund to be paid to by

Telegraphic transfer to overseas bank
account Account#: _____
Account Name: _____
Bank Name: _____
SW IFT Code: _____
IBAN (If Applicable): _____

EFT bank transfer to my Australian bank account⁴
BSB _____ - _____ Account#: _____
Account Name: _____

Credit note

</we> understand that:

- This application will be processed within 4 weeks of receipt only if </we> have supplied all relevant documents
- This application is assessed according to the Refund Policy which </we> signed agreeing to the terms and conditions on the application form
- If the refunds is paid in accordance to the written instructions, and then subsequently claimed by another person including (but not limited to) student, relative, agent, corporation or other person, or otherwise refunded incorrectly by APC, </we> agree to indemnify APC and be personally liable to compensate APC for the full amount of the refund. In addition, </we> agree to indemnify APC any legal or other associated costs which may be incurred by APC in trying to recover the refunded amount.
- </we> acknowledge and declare that the above is a true statement and by signing below </we> waiver any future claims on APC for any compensation, financial or otherwise.
- </we> acknowledge that in a case of student visa refusal, by signing below </we> request that this document be taken to be <my/our> course variation request to withdraw from the above named course.

I confirm that I have provided / checked:

- Student or Student & Parent's (if Student under 18) Identification;**
- Witness Identification forms (Passport, Driver's License etc; and**
- Signatures match with legible identification panels.**

Student Signature: _____
Parent Signature⁵: _____
Date: _____
Witness Name⁶: _____
Signature: _____
Date: _____

¹ A residential address must be provided as any refunds will be sent by registered mail

² For students under 18 yrs old at the time of their application, any refunds will be forwarded to the student's parent/legal guardian

³ A residential address must be provided as any refunds will be sent by registered mail

⁴ A valid Australian bank account is required

⁵ If applicant is under 18yrs old at time of course application the parent must co-sign this form (regardless if the student has since turned 18 yrs old)

⁶ This form must be witnessed by an independent person