

Refund Request Form

Important Notes

Please read the MHE Fees and Refunds Policy and Procedures before you fill in this form. These documents outline your eligibility for refunds and time frames for repayment. All fees and refunds are in Australian dollars only. Fill in all relevant sections of this form and return it to the Finance Manager.

Personal Details

Family name: _____ Given name(s): _____

Student ID: _____ Phone: _____

Email: _____

Street address: _____

Suburb: _____ Postcode: _____ State: _____

Country: _____

Refund Request

I request a refund of \$ _____ (AUD) for:

- ☐ Tuition fees
 - ☐ for my whole course
 - ☐ for these units: _____
- ☐ Document issue
- ☐ Student ID card issue
- ☐ Extracurricular activity
- ☐ Graduation
- ☐ Other ancillary charge: _____

Reasons:

- ☐ Medical (attach certificate from medical professional)
- ☐ Approved withdrawal or leave (attach copy of approval letter)
- ☐ Visa rejection (attach copy of letter from Department of Home Affairs)
- ☐ Other: _____

Details (please attach any relevant supporting evidence):

Payment Details

Note: If the payment is to another institution, please attach copies of the signed Letter of Offer and Confirmation of Enrolment if possible. If the payment is to a third party (e.g., a sponsor), please attach proof of identity for that third party, a copy of your student passport photo page and evidence that this third party made the original payment.

Third party's full name

Third party's address

Suburb: _____ Postcode: _____ State: _____

Country: _____

Credit Card

Card type:

- ☐ Visa
- ☐ Master Card
- ☐ American Express

Card number: _____

CVV: _____ Expiry date: ____ / ____

Cheque (within Australia only)

- ☐ Post to the above address

Electronic Funds Transfer

Bank name: _____ BSB (local bank only): _____

Account: _____ SWIFT Code: _____

Declaration

I declare that:

- ☐ All information on this form is true and correct.
- ☐ I have read and understood the Fees and Refunds Policy and Procedures and accept that these documents govern how this form will be processed.
- ☐ I understand that refunds will be made within four weeks of submitting this form to the Finance Manager.
- ☐ I accept that MHE is not responsible if the refund does not reach my bank account due to wrong bank information on this form.
- ☐ I accept that fees and refunds are in Australian dollars only and MHE is not responsible if I receive less than I paid in the currency of my homeland due to exchange rate fluctuations.
- ☐ I permit MHE to release my personal details if necessary to resolve this request.

Signature: _____ Date: ____ / ____ / ____

Office Use Only

Form received: ____ / ____ / ____

Fee received from student / third party: \$ _____ (AUD)

Less non-refundable administration fee: \$ _____ (AUD)

Total refundable: \$ _____ (AUD)

Processed by:

Name: _____ Title: _____

Signature: _____ Date: ____ / ____ / ____

Approved by:

Name: _____ Title: _____

Signature: _____ Date: ____ / ____ / ____

Comments:
