

English Language Centre – Refund Form



RETURN COMPLETED FORM TO:

By Post:
English Language Centre - University of Tasmania
Private Bag 14, Hobart
TAS 7001 Australia

By Courier:
English Language Centre - University of Tasmania
Level 2, Hytten Hall, French Street, Sandy Bay,
TAS 7005 Australia

By Fax: (61 3) 6226 2525

By Email: ELC.Finance@utas.edu.au

All refund payments will be made in Australian Dollars and it is University policy to make payments by Electronic Funds Transfer (EFT).

Family Name: _____ Given Names: _____

Student ID: _____ Telephone Contact: _____
Include Country & Area Code if Overseas

Student Email: _____ @ _____

Address: _____

Reason(s) for Refund: _____

I will not be making any further variations to my enrolment which will affect the fees payable. I understand that payment of the Refund may take up to 4 weeks to process.

Amount Requested: AUD \$ _____

Applicant's Signature: _____ Date: _____

IF this Refund payment is to be made to a party other than the student, the student MUST complete the authorization section below.

I, _____, authorize payment of my overpaid fees to _____
STUDENT'S FULL NAME FULL NAME OF INDIVIDUAL or ORGANISATION

_____ STUDENT'S SIGNATURE: _____

AUSTRALIAN BANK ACCOUNT:

BSB Number: |__| |__| |__| - |__| |__| |__| Account No.: |__| |__| |__| |__| |__| |__| |__| |__| |__|
Must be 6 digits Maximum 9 digits

Account Name: _____ Bank Name: _____
EG: ANZ, CBA, NAB EG: Sandy Bay

OVERSEAS BANK ACCOUNT:

Full Account Name: _____

Full Account No: _____

Bank Name: _____

Full Bank Address: _____
REQUIRED INFORMATION: Building, Street, Suburb, City, State, Country

IBAN, SWIFT, Routing or ABA Number (Bank Branch Identifier): _____

ELC OFFICE USE ONLY

ELC Fees OP.052011.15200.0 \$

Health Cover OP051829.15500.0 \$

H/Stay Placement OP.052013.15203.0 \$

H/Stay Rent OP.052013.15203.0 \$

TOTAL REFUND APPROVED \$ _____

COMMENTS

REFUND APPROVED BY: _____ Date: _____
Signature Print Name