

## APPLICATION FOR REFUND OF TUITION FEES

**Note:** Please complete the form by providing the requested information within the blank spaces below.

**Purpose:** Application for refund of tuition fees in accordance with the *Refund Policy and Procedure* of the MATIC International College.

**Refund Note:** *The refund will be processed within 28 calendar days after the college receives completed and accurate documentation.*

|                    |  |                |  |
|--------------------|--|----------------|--|
| First names:       |  | Family Name:   |  |
| Student ID:        |  | Date of Birth: |  |
| Passport Number:   |  |                |  |
| Email:             |  |                |  |
| Contact Number:    |  |                |  |
| Personal Address:  |  |                |  |
| Amount Paid (AUD): |  |                |  |

Beneficiary's Account Name: \_\_\_\_\_

**BSB (Australian bank account only):** \_\_\_\_\_

Beneficiary's Account Number: \_\_\_\_\_

Beneficiary's Bank Name: \_\_\_\_\_

Beneficiary's Bank Branch Name: \_\_\_\_\_

Beneficiary's Bank Address: \_\_\_\_\_

City/Suburb: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postcode: \_\_\_\_\_

Swift Code: \_\_\_\_\_ IBAN: \_\_\_\_\_

Beneficiary Account Holder Address:

\_\_\_\_\_

Signature of Student:

\_\_\_\_\_

*(Must be handwritten)*

Date: \_\_\_\_\_