



Ruby Institute

Application for Refund

First Name		Student ID	
Surname		Withdraw Date	
DOB		Course/s	
Gender		Education Agent	

Enrolment status

Please tick

- I have commenced my course ☐
- I have not commenced my course ☐
- I currently owe fees and want them reconsidered ☐

Reason for refund request

Nominated bank account

Bank:	Account Name:	
Branch:	BSB:	
SWIFT Code (if overseas):	Account Number:	
Recipient Address (if overseas):		
Postcode:	Country:	Phone Number:

Student Signature:	Date:
Printed Name:	

Office Use Only

Processed by:		Signature:	
GD Number:		Date:	
<input type="checkbox"/> Approved		<input type="checkbox"/> Not Approved	
Notes:			