## Sydney International Academy Pty. Ltd t/a Australian Centre of English

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## **Application for Fees Refund – International Students**

If visa refused from Australian High Commission (Please attach copy of the letter)	1. PERSONAL DETAILS			
Current residential address:  State: Postcode: Contact phone number: Email address: Course Enrolled: eCOE Code:  What are your reason(s) for requesting a refund? If visa refused from Australian High Commission (Please attach copy of the letter) Non-Commencement (Please check Australian Centre of English refund policy)  2. BANK ACCOUNT DETAILS Overseas bank account details  Name of Bank: Address of bank (include country): Account no: Account no: Account name: BANK SORT CODE/ABA RT # or SWIFT reference:  Australia bank account details  Name of Bank: Account no: Account name: BSB: Account no: Account no: Account name: IBSB: Account no: Account no: Account no: Account name : IBSB: Account no: Account no: Account no: Account name : IBSB: Account no: Account	Family name:	Given name(s):		
State: Postcode: Contact phone number: Email address: eCOE Code: eCOE CODE CODE CODE CODE CODE CODE CODE C				
Contact phone number:Email address: Course Enrolled:				
Course Enrolled:				
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Name of Bank:		S		
Address of bank (include country):	Overseas bank account details			
Address of bank (include country):	Name of Rank:			
Account no: Account name:				
Australia bank account details  Name of Bank: BSB:  Account no: Account name:  3. DECLARATION  I have read and understood Australian Centre of English Cancellation and Refund Policy and I declare that to the best of my knowledg the information supplied by me is true, correct and complete in every respect. I acknowledge that the submission of false, incorrect, incomplete or misleading information may result in refusal of my refund request or delays in processing	,			
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Student's signature: Date:/	the information supplied by me is true, co	rrect and complete in every respect. I	acknowledge that the submission	
	Student's signature:	Date:/	//	
OFFICE USE OLNY		OFFICE USE OLN	Υ	
Processed date:	Approved by:			
Approved by: Updated:		Updated	d:	