

## National Academy of Professional Studies (NAPS) SS015F Refund Request Form

Students who wish to have any paid fees refunded need to complete this form. For more information, contact the Registrar.

Staff need to save a copy of this form in both the students' records and the Refunds files, renamed as NAPS SS015F STUDENTS LAST NAME

Student Name:	Student ID Number:					
Address:						
Email:	Telephone/ mobile:					
Course:						
Request Details:						
	hers (please specify)					
Account Name:						
Bank Name Address:						
BSB No: Account No:						
Swift Code :						
Switt Code .						
Reason for Refunds:						
Evidence assessed to support decision:	] Letters					
☐ Others (Please Specify)						
Details:						
Details:						
I declare that the information provided by me is correct and co	omplete and I am aware that my refund application will					
be assessed according to the refund policy in the terms and conditions of enrolment. I authorize NAPS to transfer my						
refund to the account indicated above.						
Si	tudent's Signature/					
	Date					
	2010					



## Notes:

- 1. For course cancellation or withdrawal, the student must complete a SS020F2 Notification of Withdrawal or Enrolment Cancellation Form and attach it to this request.
- 2. Approved refunds will be paid either by direct deposit or by telegraphic transfer to the nominated account within 14 days of receiving refund application.
- 3. All refunds incur a \$250 administration fee except where it is specifically stated.
- 4. Bank charges will be deducted from the total refundable amount.

## For Office Use Only

Date received		Letter sent	Payment made (date)	
			(cheque/EFT)	
Fees paid to date	\$ Enrolment fee	\$	Course /monthly fees	\$
	(non-refundable)			
Fees paid in advance to date	\$ Less admin fee	\$	Final refund amount	\$
Verified by Registrar				
APPROVED /NOT APPROVED			Date:	
Name:				
Signature:				

NAPS