

# APPLICATION FOR REFUND/CREDIT ADJUSTMENT

USE BLOCK LETTERS WHEN COMPLETING THIS FORM AND PLEASE KEEP A COPY.

## STUDENT DETAILS

Title Mr Ms Other (please specify):	
Family name	Given name(s)
Date of birth (dd/mm/yyyy)	Student ID

## AGENT DETAILS (if applicable)

Agent name/contact person	Country
Telephone (home/mobile)	
Email	
Agent signature	

## ENROLMENT DETAILS

Enrolment ID	Course	Course start date (dd/mm/yyyy)
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## ORIGINAL PAYMENT METHOD

Initial payment via  
 EFTPOS     Bank Transfer     Credit Card (Mastercard/Visa)\*\*     FEE-HELP

\*\*Payment made by credit card will be returned to the same credit card. If the credit card is lost or expired, we will refund it by cheque. Provide the details below.

Card number (first 4, last 4 digits only) _ _ _ _ /XXXX/XXXX/ _ _ _ _	Bank details different from Student (mandatory) Yes    No (If 'Yes' please attach bank authorisation statement from student providing permission to refund agreed amount into account below).	
Bank name	Bank address	
SWIFT code	Account holder name	
Bank details verified (mandatory) Yes    No	BSB number	Account / IBAN number

Is this an international bank account? if yes, please provide the Intermediary Bank Details.  
 Yes    No    AUD Correspondent Bank: \_\_\_\_\_ SWIFT Code: \_\_\_\_\_

## REFUND / ADJUSTMENT DETAILS

Refund amount requested
Reason (please tick one): <input type="checkbox"/> Request to withdraw prior to commencement <input type="checkbox"/> Offer of enrolment withdrawn <input type="checkbox"/> Overpayment <input type="checkbox"/> Request to withdraw post commencement <input type="checkbox"/> Student visa cancellation <input type="checkbox"/> Scholarship <input type="checkbox"/> Other (please state):

## STUDENT DECLARATION

I declare that the informaton I have provided on this form is true and correct.  
 I acknowledge that the provision of incorrect information or the withholding of relevent information in relation to my application may delay the processing of my refund.

Student Signature	Date (dd/mm/yyyy)
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### OFFICE USE ONLY

Invoice number(s)		Receipt number (to be refunded)		AUDIT/NIRD number (for credit card refund)	
Fees paid	Non-refundable amounts (e.g. administration/enrollment fee:)	Extra charges to be invoiced (e.g. late fee/ change fee/credit adjustment fee):		Total refund:	
OSHC Cancellation Required (If applicable)      Yes    No Note: can only be cancelled before the student has started studying. OSHC can not be refunded by Kaplan after the policy has been processed. The student will need to contact their health provider directly to organise a cancellation and refund if eligible.					
Prepared by (KBS)				Date (dd/mm/yyyy)	
Approved by (KBS)				Date (dd/mm/yyyy)	
Processed by (Finance)				Date (dd/mm/yyyy)	

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Return this form to your Kaplan Business School Student Experience Team:

**Adelaide**

Level 1, 68 Grenfell Street  
Adelaide SA 5000  
Tel: +61 (0)8 8215 4100  
Email: [adelaide@kbs.edu.au](mailto:adelaide@kbs.edu.au)

**Brisbane**

Ground Floor, 369 Ann Street  
Brisbane QLD 4000  
Tel: +61 (0)7 3872 3800  
Email: [brisbane@kbs.edu.au](mailto:brisbane@kbs.edu.au)

**Melbourne**

Level 4, 370 Docklands Drive  
Docklands, Melbourne VIC 3008  
Tel: +61 (0)3 9626 4576  
Email: [melbourne@kbs.edu.au](mailto:melbourne@kbs.edu.au)

**Sydney**

Level 8, 540 George Street  
Sydney NSW 2000  
Tel: +61 (0)2 8248 6758  
Email: [sydney@kbs.edu.au](mailto:sydney@kbs.edu.au)