

## REFUND REQUEST FORM

Please return this form to Reception or email [admin@dnakingstontraining.edu.au](mailto:admin@dnakingstontraining.edu.au).

STUDENT DETAILS			
Student Name:		Student ID:	
DOB:		Mobile No:	
Email:			
REFUND DETAILS			
Course Name:			
Reason for Refund:			
Authority for third party to receive payment:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of third party:			
DIRECT DEPOSIT – AUSTRALIAN BANK DETAILS			
Account Name:		BSB:	
Bank Name:		Account No:	
DIRECT DEPOSIT – INTERNATIONAL BANK DETAILS			
Account Name:		Bank Name:	
Account No/IBAN:		Bank Branch:	
SWIFT/BIC Code:		Country:	
Bank Address:			
Overseas Address:			

\* International payments are processed via our bank account and may take up to 10 business days to be received. Please contact us if you have not received your refund within this timeframe.

CREDIT CARD (if original payment was made with this credit card)																		
Name on Card:																		
Card No:															CSV:			
Expiry Date:						Type of card:	<input type="checkbox"/> Mastercard <input type="checkbox"/> Visa											

\* Original payments made by Credit Card will be refunded to the original card the payment was made from. Please ensure you add the same credit card details here.

**Student Declaration:**

I confirm I have read and understood DNA Kingston training's [Refund Policy](#).

I understand that DNA Kingston Training will not transfer any funds to a third party unless I explicitly request it in writing, in which case DNA Kingston Training will be released of any responsibility in relation to the refund, once the funds have been transferred as requested.

Student Name			
Students Signature:		Date:	

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**COLLEGE OFFICE USE ONLY - Finance Department (this section)**

Received by:		Date:	
Agent Name:		Commission:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Transaction No:		Amount:	<b>AUD \$</b>
Fee Reconciliation and Calculation:			
Authorise Signed:		Date:	