Murdoch College Request for Refund/ Credit Adjustment Form

Murdoch College | Murdoch University

Use BLOCK LETTERS when completing	this form and please keep a copy.		
Representative information (if applicable)		Original payment method	
Agent name/contact person		Initial payment via	
- ·		EFTPOS Flywire Bank Transfer	
Country		Credit Card (Mastercard/Visa)** FEE-HELP **Approved refunds are paid in Australian dollars ONLY into the	same account or credit card from
,		which the original payment was made at the time of enrolment.	. If the credit is lost or expired, we
E-mail		will refund the payment via bank transfer. Please provide proof Provide the details below.	of account closure.
		Card number (first 4, last 4 digits only)	
Telephone	Fax	XXXX XXXX	
		Bank details different from Agent/Student (Mandator	у)
Agent signature:		Yes No	
		(If Yes' please attach authorisation email from agent/ to refund agreed amount into account below).	student providing permission
		Do you consent for the refund to be paid in the nominated	d banks currency?
Student details		∫ Yes □ No	,
		Please provide the nominated banks local currency	
Title Mr Ms Other (please	specify)		
Family name		If you answered no to the above question or your bank o	
		Nepal or Pakistan, please provide the intermediary ban obtained from your local bank branch.)	k details. (These details can be
First name(s)	Date of birth (d/m/y)		
		AUD Correspondent Bank & SWIFT code	
Enrolment ID	Student ID		
		Bank details verified (Mandatory) □ Yes □ No	
		Account Holder Name	
Enrolment details		Account holder Name	
Program	Stream	Account Holder Address	
		Account holder Address	
Course Completion Date		Account Number	
Refund/ adjustment details		Bank Name	
Refund/adjustment amount requested			
		Bank SWIFT Code or BSB	
Reason (please tick one):			
Request to withdraw prior to comme	ncement		
Offer of enrolment withdrawn		Student declaration	
 Request to withdraw post commence Visa cancellation/delayed 	ement	I warrant that the information I have provided in this form is and indemnify Kaplan from all loss, claims and liability if t	
 Overpayment 		despite Kaplan applying the information I have provided in not providing all requested information, this may delay	
Scholarship		Signature	Date
Other (please state):			Dute
	e College's Privacy Policy published on our		
website murdochcollege.edu.au/forms_j			
	tside Australia that do not accept international swift code may be required. Please check with		
your financial institutions and ensure to p	rovide COMPLETE banking instructions to		
avoid any delays in receiving your refund			
Office use only			
Invoice number(s)	Receipt number (to be refunded)	AUDIT/NIRD number (for credit card ref	und)
Fees paid:	Non-refundable amounts (administration/	enrolment fee): Extra charges to be invoiced (late fee/chang	ge 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 ne	ed to contact their health provider directly to organise	e a cancellation and refund if eligible.	
Prepared by	Date	Approved by	Date
	5		
Head office authorisation	Date	Processed by (print name)	Date

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