Department	Vocational Education & Training		Author(s)	RTO Manager	
Quality Controlled Document No. & Title	9.1	RTO Fee Refund Form	Approved	RTO CEO	
Version	2.0		Authorised	RTO Academic Board	
SRTOs 2015	Standard	ds 5 and 7, Schedule 6	Distribution	Internal	RTO Staff RTO Students
				External	Prospective Clients

Surname		Given Names				
Student ID		Contact No.				
Title of Course						
Indicate the reason(s) for requesting a refund	 the course has been cancelled the course has been rescheduled to a time and location that is unsuitable the RTO ceased to provide training and assessment for the course I have withdrawn from the course I wish to defer my course enrolment Other reason(s):					
Additional Information	If you have withdrawn from the course, or wish to details of your reasons. In some cases Marriott A evidence, such as withdrawal due to medical rea	Academy may re				
Student's Signature		Date				

OFFICE USE ONLY

Refund approved: 🗇 Refund not approved: 🗇 Reason for non-approval:							
If refund approved:							
Additional evidence, if required, must be filed in student's administration file.							
Amount refunded \$							
Payment method							
Date paid							
Authorised by							
Signature							