

VET Fee Refund Form (16.1)

Please refer to Fee Refund Policy (16.0)

| Surname | |
|--|----------------------|
| Given Names | |
| Date | |
| Title of Course | |
| | Personal |
| Explain your reason(s) for requesting a refund ¹ | Medical ² |
| | Other |
| Student's Signature | |
| Parent's Signature | |

¹ The RTO may require suitable evidence supporting your claim to be presented.

² All applications on medical grounds must be accompanied by verifiable documentation, such as Medical Certificates.

OFFICE USE ONLY