

# Student refund application

A refund can only be made to the person who made the original payment. Refunds can only be made back to the original card for POP and EFTPOS.

Name of the person requesting the refund: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode \_\_\_\_\_

Student's first name: \_\_\_\_\_ Student's last name: \_\_\_\_\_

Class: \_\_\_\_\_ Scholastic Year: \_\_\_\_\_

Original payment for: \_\_\_\_\_

Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Receipt number: \_\_\_\_\_

Original payment method:          POP          EFTPOS          Cheque          Cash

Reason for refund: \_\_\_\_\_

Refund bank details:

Bank: \_\_\_\_\_ Account name: \_\_\_\_\_

BSB: \_\_\_\_\_ Account number: \_\_\_\_\_

Parent/carer signature:

Date:

## SCHOOL OFFICE USE ONLY

Request for refund approval by: (Name) \_\_\_\_\_ (Title) \_\_\_\_\_ Date: \_\_\_\_\_

Approved By Delegated Officer: (Name) \_\_\_\_\_ (Title) \_\_\_\_\_ Date: \_\_\_\_\_

Processed in ebs4 Cash Desk by: (Name) \_\_\_\_\_ (Title) \_\_\_\_\_ Date: \_\_\_\_\_

EBS4 Refund Receipt Number R \_\_\_\_\_

Quickmatch Refund Receipt No. (if applicable) \_\_\_\_\_