

REFUND REQUEST – ALTERNATIVE PAYEE

To be used when the refund is to be paid to someone other than the student.
Please **PRINT CLEARLY** using blue or black pen.



A. STUDENT DETAILS

Student name

Student number

Refund Request form completed Yes

No You must complete a Refund Request form

B. PAYEE DETAILS INCLUDING CONTACT DETAILS (All fields must be completed. Print clearly)

Name of payee (not student)		Date of Birth:
Payee address		
<input type="text"/>		
<input type="text"/>		
City	State	Postcode
Country		
Phone number		
Email address		

C. REASON YOU ARE REQUESTING AN ALTERNATIVE PAYEE AND NOT REQUESTING PAYMENT TO YOUR OWN ACCOUNT

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

D. STUDENT SIGNATURE

Signed
(Student signature)

Date / /