

# Application for Refund of Fees

Completed Application for Refund of Fees form is to be submitted via e-mail to [finance@curtin.edu.sg](mailto:finance@curtin.edu.sg)

## STUDENT DETAILS

Student ID: <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> <div style="border: 1px solid black; width: 25px; height: 25px; margin: 2px;"></div> </div>	E-mail:  Contact No:
Family Name:	Course Title:
Given Name:	Refund Amount:

## REASON FOR REFUND

Please tick (✓) one of the reasons for refund.

Course Withdrawal    
  Course Completion    
  Course Termination    
  Campus Transfer

Others: Reason for Refund under Special Circumstances  
 (please state your reason if it does not fall under any categories given above)

If you do not include details regarding any Special Circumstances that may have occurred, with adequate supporting documentation, your refund will be assessed as per the Refund Policy and penalties may apply.

To be assessed under Special Circumstances, students must demonstrate that the circumstances:

- Were beyond their control; and
- Were unforeseeable before the census date; and
- Did not make their full impact until after the census date; and
- Affected them to the extent that they could not continue studying the unit/s.

These circumstances may include a physical or psychological illness; or personal or family circumstances, including a death or illness of a close relative; or a change in employment conditions.

Applications are assessed primarily on the independent supporting documentation provided to demonstrate your circumstances. All documentation should be provided as an original, or certified, signed copy on letterhead. Relevant dates must be included in supporting documentation to demonstrate the timeline of events leading to your withdrawal/incapacity to continue studies.

In Special Circumstance cases independent original or certified documentary evidence must also be attached (eg. medical certificate, letter from counselor, letter from employer).

Please provide your reasons for requesting a refund under Special Circumstances. If there is not enough space please attach a separate sheet.

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## REFUND METHOD

### Electronic Funds Transfer (EFT)

Please provide your bank details as follows:

<b>Bank Name:</b>	
<b>Bank Branch Address:</b>	
<b>Bank &amp; Branch Code:</b>	
<b>Swift Code:</b> (for overseas transfer)	
<b>Account Number:</b>	
<b>Account Holder Name:</b>	
<b>Relationship with Account Holder:</b> (skip this if Account holder is under your name)	
<b>Home Address:</b> (for overseas transfer)	

\*Please note that there is **\$35.00 Telegraphic Transfer Bank fee** deducted from the approved refund amount for **overseas transfer**.

## DECLARATION

- I declare that the information I have given on this application is correct and understand that if I knowingly make false or misleading statements, I may be liable for prosecution. I authorise Curtin Singapore to obtain any necessary information pertaining to my application form.
- I have included my reasons for special circumstances and attached independent supporting documentation substantiating my claims for Special Circumstances as required. I understand that failure to provide required adequate information or supporting documentation will result in my refund being assessed as per the Refund Policy. All documentation attached is an original or certified copy.
- I understand that according to Curtin Singapore policy the refund will be processed within seven (7) working days from the lodgement of a complete application. I am aware that failure to provide all necessary information will result in my refund assessment being delayed.
- I have read and understood the Refund Policy.

**SIGNED by the Student:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**SIGNED by the Student's parent or legal guardian**  
**(if the student is under eighteen (18) years of age):** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
**Name of Parent or Legal Guardian:**

## OFFICE USE ONLY

Verified student's age and the requirement for student's parent or legal guardian to sign the declaration where applicable

Refund amount: \_\_\_\_\_

Authorised by Pro Vice-Chancellor and President or delegate

Authorised by Chief Operating Officer or delegate

Refund Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Processed by: \_\_\_\_\_