



# ST AUGUSTINE'S COLLEGE - SYDNEY

A Catholic Congregational school for boys in Years 5 to 12, teaching the Augustinian values of  
'Truth, Love & Community'

## International Student Program

### Request for Refund

Student Details	
Family Name:	Given Name:
Date of birth:	Email:
Date of withdrawal:	Mobile:
Refund Details	
Refund request amount: AU\$	
Reason for refund:	
Did student commenced study? YES / NO	Date Commenced:
Payment Details	
Payee Name:	Relationship to Student:
Payee Address:	
Bank Name:	
Bank Address:	
Account Name:	
Account No.:	
BSB Number:	Swift Code:

Office Use Only
Student ID No.:
Date form was received:
International Office Approved: YES / NO
Date Parents notified of outcome:
Signature: _____
International Executive Officer, Vivian Cao

Office Use Only
Family Code:
Amount refunded: AU\$
Finance Dept. Approved: YES / NO
Date Paid (if refund granted):
Signature: _____
CFOO Alicia Brown

- I/We have read and understood the College Refund Policy
- I/We understand that this request may not be approved

Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

