

Request for refund — Student/Parent

(not Home Schooling fee)

The first three sections must be completed in full for the refund to proceed.

Please refer to refund policy in the Statement of Fees: Home-based students.

1. Parent/Guardian/S	Student details									
Parent/Guardian name										
Student name					EQ ID:					
2. Bank account deta	ails (for person invoice	d / finar	cially r	espons	sible)					
Bank account name										
BSB			Account number							
Please note: BrisbaneSDE i	s unable to adjust/enter details	after a st	udent car	ncels, whi	ch may res	sult in a ch	nequ	e being issued.		
3. Refund for 20										
Resource/Subject/Courier/Activity			Year level Reason for			for refund (e.g. leaving)				
Parent/Guardian Signature						Da	ate			
Return to:										
Postal				Email						
Attention: Accounts Department Brisbane School of Distance Education			accounts@brisbanesde.eq.edu.au							
GPO Box 1308 Brisbane Qld 4001										
BrisbaneSDE office u	se only									
Approved Not approved:										
Refund items		Invoice	Invoice number		Receipt number			Amount		
Recommending officer						Date				
Discovery Centre						Date				
Principal/Approving officer						Date				

