



APPLICATION FOR REFUND - WITHDRAWAL/DEFFERAL FORM

Please Note: Applications for refunds may take up to 5 working days to be processed. We do not provide refunds in cash. Refunds will only be processed into a clients account.

Course Name:	
Course Code:	
Course Start Date:	
Trainer/ s:	
Student Name:	
Company Name: (if applicable)	
Address:	
State:	Postcode:
Phone:	Fax:
Reason for: Refund and Withdrawal Deferration Deferr	☐ (please give your reason for withdrawing with a
Please provide your account details below for Dire	ct Deposit.
Name on Account:	
Bank Name:	
Bank Address:	Postcode:
BSB Number:	
Account Number:	
Office Use Only: Outline action taken and outcome	».
Refund: Paid	Not Paid Date Paid:
Deferral: Fee Held in Trust	
Star Training Staff Member Signature:	Date: