## **Refund Request Form**



Section 1 – Client Details								
Name:			Date:	/ /				
Phone:								
Email:								
Course:			Course Date:	/ /				
	1							
Section 2 – Refund Details								
Type of Refund:								
☐ Withdrawal	Cancellation [	Transfer	ransfer					
Invoice Number:			Amount:	\$				
Reason: (Please attach any supporting documentation)								
Acknowledgement								
I understand that my request for a refund will be processed in accordance with the NextGen Skills Refund Policy.								
Signature			Date:	/ /				
Admin Use Only								
Section 3 – Authorisation								
This request has been:								
Approved	☐ Denied	Adjusted to \$						
Comments/ Reason for decision / Calculations of Refund:								
Refund Method:								
☐ EFT / Credit Car	rd Cheque Credit to Corporate Account							
Notification sent:	☐ Email ☐ Letter	Date sent:						
Admin Name:		Signature:						
Position:		Refund Da	te:	/ /				
Refund Number:								

Approval Date:	23 Jan 2025	Approved By:	John Whelan		Page 1 of 1
Next Revision Date:	23 Jan 2027	Document Number:	DOC0072	Revision:	1.5