

FM – AC16 REQUEST FOR REFUND



Refunds can only be paid in limited circumstances. A reference to these circumstances is outlined in the VETASSESS Refund Policy available online at www.vetassess.com.au. If you wish to withdraw your application or seek a refund from VETASSESS, you must complete this form. If your application is approved, refunds will be made in Australian dollars and will be credited to the same account the payment was made to VETASSESS.

Please use a pen, and write neatly in English using BLOCK LETTERS.

APPLICANT FAMILY NAME (SURNAME):											
APPLICANT GIVEN NAMES:											
DATE OF BIRTH (DD/MM/YYYY):	/	/	File No:								
ADDRESS:											
TELEPHONE NUMBER:	(AREA CODE)									
MOBILE/CELL NUMBER:	(AREA CODE)									
EMAIL ADDRESS:											

Refund for my application fee for the following program: tick where applicable below ☒

☐ Skills Recognition – Professional Occupations

OR

☐ Other program/service (please state) _____

Please note: VETASSESS reserves the right to retain an administration fee

REASON FOR REFUND

Please include any information which may support your request. Extenuating circumstances will be considered on a case by case basis and must be supported with accompanying documents, for example, illness/accident – medical certificate, death of a close relative – statutory declaration.

HOW TO SUBMIT THIS FORM?

Please print, complete and sign this form. Email or scan a copy of the completed form to: refund@vetassess.com.au

Applicant signature and date

SIGNATURE

DATE