



OnRoad OffRoad Training

RTO No 60071

Refund Request Form

Details		Refund Type	Tick
RR No (Admin Staff):		Withdrawal	
Date:		Transfer	
Name:		Cancellation	
Course:		Other	

Section 1			
I request a refund for the following:			
Invoice Number:	Initial Payment method Cash EFTPOS Cheque Direct Debit		
Amount:	Name on card: _____	Expiry Date ____/____	CVC _____
	Card No: _____		
Bank Details:	BSB: _____ Account No: _____		
Reason: (Please attach any supporting documentation)			

Section 3			
Acknowledgement			
I understand that my request for a refund will be processed in accordance with OnRoad OffRoad Training Refund Policy. I also understand that I shall have access to the Complaints and Appeals process, should I not agree with the outcome or decision.			
Print Name:		Signature:	

Authorisation			
Authorisation for Processing			
Action to be taken:	APPROVED	DENIED	ADJUSTED AMOUNT



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Comments:			
Signed:		Position:	
Print Name:		Date Processed:	
Amount to be refunded:			
Admin Use Only			
Refund Register			
Logged in Refund Register:	Yes	No	Date:
Logged By:			Signature:
Refund Processed			
Formal Letter Sent:	Yes	No	Date:
Sent By:			Date:
Appeal of Decision			
Appeal Lodged:	Yes	No	Date:
CAF Number:			Date:

Document Name and Number:	Version and Date:	Responsible Person:	Purpose and Comments:
Refund Request Form	Aug 2020/V1	Training Manager	Ensure compliance with Standards for Registered Training Organisations (RTOs) 2015 Standard 5 clause 3