



# Refund Form

Version 4 – Updated March 2026

Use this form to request a refund in relation to fees, withdrawals, cancellations, duplicate payments, administrative errors, or other circumstances covered by CTIA’s Refund Policy. Please attach supporting evidence where applicable.

## Refund Request Pathway

### Stage 1: Informal Resolution

Student discusses the fee or refund matter directly with CTIA staff to attempt early resolution.

If unresolved, move to Stage 2.

### Stage 2: Formal Internal Refund Request

Student submits this Refund Form to CTIA Management.

Acknowledged within 5 business days and investigated/decided within 20 business days.

If dissatisfied, move to Stage 3.

### Stage 3: Internal Review

Senior Management not involved in the original refund decision reviews the request for procedural fairness and any new evidence.

If still dissatisfied, move to Stage 4.

### Stage 4: Independent External Review

If unresolved internally, the student may access CTIA’s complaints and appeals pathway, including referral to an independent external body where applicable.

CTIA will implement any required corrective action.

## 1. Student Details

Student Name: \_\_\_\_\_

USI: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Course / Qualification (if applicable):** \_\_\_\_\_

## 2. Course / Payment Details

Course / Qualification: \_\_\_\_\_

Course Start Date: \_\_\_\_\_

Invoice / Receipt Number: \_\_\_\_\_

Original Fees Paid / Amount Requested: \_\_\_\_\_

**Assessor / Decision Maker (if known):** \_\_\_\_\_

## 3. Type of Refund Request

- Withdrawal before commencement
- Withdrawal after commencement
- Course cancelled by CTIA
- Duplicate or overpayment
- Administrative / invoicing error
- Funded training / eligibility issue
- Other: \_\_\_\_\_

#### 4. Reason for Refund Request

- Medical or compassionate grounds
- Change in personal circumstances
- Employment / workplace change
- Course or timetable no longer suitable
- CTIA cancelled or changed the course
- Duplicate payment / incorrect charge
- Other: \_\_\_\_\_

#### 5. Refund Request Statement

Please explain why you are requesting a refund. Include what happened, relevant dates, course/payment details, and why you believe a refund should be granted.

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#### 6. Supporting Evidence / Attachments

List any supporting evidence attached to this form, such as medical certificates, payment receipts, emails, enrolment confirmations, or other relevant documents.

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#### 7. Preferred Resolution

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#### 8. Student Declaration

I declare that the information provided in this refund request is true and correct to the best of my knowledge. I understand that CTIA will assess this request in accordance with its Refund Policy and that additional information may be requested.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### 9. Office Use Only

Case Number: \_\_\_\_\_ Date Received: \_\_\_\_\_

Date Acknowledged: \_\_\_\_\_ Assigned Officer: \_\_\_\_\_

Refund Policy Clause Applied: \_\_\_\_\_ Final Decision Date: \_\_\_\_\_

Outcome / Decision: \_\_\_\_\_

Continuous Improvement / Corrective Action Required: \_\_\_\_\_

Approved Amount / Outcome: \_\_\_\_\_ Processed Date / Ref: \_\_\_\_\_