

APPLICATION FOR WITHDRAWAL WITHOUT FINANCIAL PENALTY

Domestic students only, for:

Re-credit Student Learning Entitlement or FEE-HELP Balance,
Remit or Refund HECS or FEE-HELP Debt or Refund of Upfront Tuition Fees
Before you fill in this form, read the related information available at
<http://www.jcu.edu.au/student/feessupport/index.htm>

Office Use

CRN: _____
Advice Sent: ___/___/___
Sent by: _____

1. PERSONAL DETAILS

JCU Student Number (8 digits):

Title: Dr Mr Mrs Ms Miss Other: _____

Family Name:

Given name/s:

Date of birth (dd/mm/yyyy): ___/___/_____

Postal address:

Suburb:

State:

Postcode:

Email address:

(All correspondence in relation to this application will be sent here)

Daytime phone number:

2. SPECIAL CIRCUMSTANCES (not required for a refund of credit balance)

You must attach:

- A brief **student statement** providing information on your special circumstances, specifically how your circumstances:
 - were beyond your control; and
 - did not make their full impact until on or after the census date; and
 - made it impracticable for you to complete the requirements for the subject/s.
- An **independent supporting documentation** to substantiate your claim for special circumstances.

3. COURSE INFORMATION

Name of Course:

Course Code:

4. SUBJECT/S TO RE-CREDIT SLE AND/OR REMISSION OF DEBT

STUDENT TO COMPLETE			OFFICE USE ONLY					
Subject Code	Study Period	Year	Census date	Withdrawal date	Amount deferred	Amount paid upfront	HECS-HELP or FEE-HELP	Subject SLE

5. REFUND REQUEST (only complete this section if upfront payment made)

If you have paid upfront for your subject/s, please tick appropriate box:

- I want the credit balance to remain in my student account.
- I am applying for refund of credit balance and have provided my bank account details below.

Please note that refunds cannot be processed into credit card accounts.

Account Name:

Bank Name:

Bank Code (BSB):

Account Number:

Amount of Refund Due \$ _____ - _____

6. WITHDRAWAL WITHOUT ACADEMIC PENALTY

- By ticking this box the student is acknowledging they are also requesting a withdrawal without academic penalty from the subjects listed in Section 4.

7. STUDENT DECLARATION

I declare that the information I have supplied on and with this form is, to the best of my knowledge, true and correct.

Privacy

I understand that personal information collected on or with this form:

- will be used for the purpose of assisting JCU's Remission, Re-credit and Refund Officer to make an informed decision on my request;
- will not be passed on to any external bodies, other than those named below, without my authorisation unless a valid legal request has been made.

External bodies that will be provided with necessary details of my personal information include:

- for processing a successful application, the Department of Industry, Innovation, Science, Research and Tertiary Education (DIISRTE) for re-crediting my SLE or FEE-HELP balance, and the Australian Taxation Office (ATO) for remitting my HELP debt;
- for reviewing an unsuccessful application on appeal, the Department of Industry, Innovation, Science, Research and Tertiary Education (DIISRTE) and the Administrative Appeals Tribunal (AAT).

Student Services and Amenities Fee (SSA Fee):

- I understand the University's Student Services and Amenities Fee Policy and Higher Education Support Act 2003 (HESA) and associated guidelines state that any upfront payment or SA-HELP debt for the Student Services and Amenities Fee (SSA Fee) for subjects approved under this application will not be refunded after the applicable census date.

Signature _____ Date ____/____/____

8. RETURN DETAILS

Return this completed form with required supporting documentation, to the Student Finance Office.

Mail to:

Student Finance Office
James Cook University
Townsville QLD 4811

In Person:

Student Enquiry Centre
Education Central, Building 134
Townsville Campus

In Person:

Student Enquiry Centre
Ground Floor, Building A1
Cairns Campus

9. OFFICE USE ONLY:

Student Name: _____

Student Number: _____

Change of Grade:

Is a change of grade form required? YES NO

Date Change of Grade Form sent to Faculty: ____/____/____

Date Change of Grade completed: ____/____/____

10. STUDENT FINANCE USE ONLY:

Remission, Re-credit and Refund Officer - Please circle appropriate

Commonwealth Supported:	SLE re-credit	HECS-HELP debt remission	Payment refund
Domestic tuition fee:	FEE-HELP balance re-credit	FEE-HELP debt remission	Payment refund

Comments relating to remission/refund:

Remission, Re-credit and Refund Officer: Approved Not Approved

Signature: _____

Date: ____/____/____

Name: _____

Title: _____

Government Reported: Y N WD Date ____/____/____

Input Government Report Date: ____/____/____

Grade Recorded: Y N Change of Grade actioned

Process SLE/Remission Date: ____/____/____

Pmt Unallocated: \$RF A/C's pay Date: ____/____/____

Student Notified: ____/____/____ Initials: _____