

Application for refund – distance education fee

Privacy Statement

The Department of Education (DoE) is collecting personal information on this form in order to be able to:

- i. assess this application for a refund of part of the fee paid for distance education, pursuant to section 434 of the Education (General Provisions) Act 2006 (Qld) (the Act) and section 71 of the Education (General Provisions) Regulation 2017 (Qld) (the Regulation); and
- ii. communicate with the student and persons seeking a refund of fees for a program, or component of a program, of distance education about any aspect of this application.

If the student is enrolled in a non-state school, the non-state school will facilitate the completion and submission of this form, and be provided with a copy of any relevant communication with the student or their parents in regard to the decision made by the principal of the school of distance education about this application.

Personal information collected in this form will only be accessed by authorised staff of the school of distance education at which the student is enrolled and departmental employees. It will not be given to any other person or agency unless you have given DoE permission or DoE is authorised by law.

Refunds

A person may apply for a refund of the fee paid for distance education in accordance with Section 71 of the Regulation (<https://www.legislation.qld.gov.au/view/html/inforce/current/sl-2017-0161#sec.71>) when, due to a change in their personal circumstances, the student is no longer undertaking a component or a program of distance education. Applications for refunds must be received prior to the end of Semester 1 of the school year to which the fee relates and give details of the change of circumstances. No refunds are available for students who were enrolled at the beginning of Semester 2. Refunds are calculated in accordance with the [Refund look-up table](#). Further information on the distance education enrolment fee and the calculation of refunds is available at: <https://ppr.qed.qld.gov.au/pp/distance-education-enrolment-and-fees-procedure>.

Please complete one form per student and forward to the principal of the relevant school of distance education.

| Part A – Student details | | | | | | |
|---|-----|-----------------------|------------|-------------------------|-----|--|
| Surname | | | | Given names | | |
| Date of birth | / / | | Year level | | | |
| Residential address | | | | Postcode | | |
| Postal address | | | | Postcode | | |
| Telephone | | | | Mobile | | |
| Email | | | | | | |
| Parent/carer name | | | | | | |
| Date of enrolment at school of distance education | / / | Date enrolment ceased | / / | Refund application date | / / | |



Part B – Reason for application

| | | | | |
|--------------------------|---|--|------------------|--|
| <input type="checkbox"/> | Application for fee refund for a student no longer enrolled in a program of distance education. <i>Proceed to Part C</i> | | | |
| <input type="checkbox"/> | Application (by non-state school principal) for fee refund for a student no longer enrolled in a component of a program of distance education. <i>Complete non-state school details below then proceed to Part C</i> | | | |
| | Base school | | | |
| | Contact officer | | | |
| | Email | | Telephone | |
| | Postal address | | Postcode | |

Part C – Reason for refund

Please describe the change in personal circumstances of the student that led to them no longer being enrolled in a program, or component of a program, of distance education. If possible, please also provide any supporting documentation as evidence of these reasons.

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Declaration

I declare that the information I have given in this form is complete and correct.

Name _____

Signature _____

Date: / /

Designation Student or parent Principal of base school

To be completed by the school of distance education

In accordance with section 71 of the Regulation, this application for refund is:

Approved Not approved

| | |
|-------------------------|-----------|
| Details of decision | |
| Refund amount | \$ |
| Principal's Name | |
| Signature | _____ |
| | Date: / / |
| Comments | |

