

FEE-HELP: Application for Re-Credit and Remission of FEE-HELP Debt Form

INSTRUCTIONS

1. Please fill in this form electronically **BEFORE** printing it!
2. Ensure you sign the form
3. This form and supporting document(s) should be lodged at ECC via Mail, Email, Fax or lodge at the ECC Welcome Centre in Building 31
4. Mail to:

Finance Department, ECC
Building 31, ECU Joondalup Campus
270 Joondalup Drive,
Joondalup WA 6027

Fax: (+61 8) 6279 1111

Email: studentfees@edithcowancollege.edu.au

This form is to be used by students who withdraw from a unit of study after the Census Date (Week 4) or who have not completed the requirements for a unit and who wish to apply to have their FEE-HELP balance re-credited under the *Special Circumstances* listed in the *FEE-HELP Review Procedure* which is available on website at: <http://www.edithcowancollege.edu.au/policies>

STUDENT DETAILS

Surname:		Given Names:	
Student ID:		Amount:	
Mobile Number:			
Email:			
Course:			

UNITS FOR WHICH REFUND OR REMISSION OF DEBT IS SOUGHT

UNIT CODE	STUDY PERIOD (TRIMESTER) & YEAR	DATE OF WITHDRAWAL

SPECIAL CIRCUMSTANCES

Set out below are the special circumstances in chronological order which I believe meets the criteria in the guidelines for the remission of debt. Please refer to the *FEE-HELP Review Procedure* for further details.

DATE	EVENTS

If you need more space please attach a separate sheet.

Please turn over.....

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DECLARATION

- I have attached documentation from an independent doctor, counsellor, or other professional person to show when my condition changed to the extent that I could not continue with my studies.
- I am a domestic tuition fee paying student applying for remission of FEE-HELP debt.

I declare that the information and documentation that I have provided with this application is correct and complete.

Signature:	Date
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OFFICE USE ONLY

Academic Director			
Date Application Received:		Supporting Documents	<input type="checkbox"/> Yes <input type="checkbox"/> No
Withdrawal Date:		Application made within withdrawal date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Outcome of Application:	<input type="checkbox"/> Granted <input type="checkbox"/> Denied		
Comments:			
FINANCE DEPARTMENT (IF APPROVAL IS GRANTED)			
Has debt been reported to DET/ATO via HEIMS student submission data file		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> If NO – Debt to be back-dated to census date and unit(s) removed from MAZE		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> If YES – Debt to be re-credited and DET notified through revisions data file		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comments:			
Approval (Name and Signature):		Date:	
If NO		If YES	
Attach CAN Notice	<input type="checkbox"/>	Attach CAN Notice	<input type="checkbox"/>
Re-credit amount \$ _____ (FIN)	<input type="checkbox"/>	Re-credit amount \$ _____ (FIN)	<input type="checkbox"/>
Back-date on MAZE (Student Services)	<input type="checkbox"/>	Revision file to DIISTRE (IT)	<input type="checkbox"/>
Raise credit note (FIN)	<input type="checkbox"/>	Raise credit note (FIN)	<input type="checkbox"/>
Notify student in writing (FIN)	<input type="checkbox"/>	Notify student in writing (FIN)	<input type="checkbox"/>
Note recorded on MAZE	<input type="checkbox"/>	Note recorded on MAZE	<input type="checkbox"/>
App Checked and Filed	<input type="checkbox"/>	App Checked and Filed	<input type="checkbox"/>
Name & Signature:	Date:	Name & Signature:	Date:
STUDENT SERVICES			
Student notified in writing: <input type="checkbox"/> Yes <input type="checkbox"/> Letter/Email <input type="checkbox"/> Saved in student file			