

Claim for Reimbursement - Student



BRISBANE STATE HIGH SCHOOL

I, _____ being the parent/guardian of _____ in Year _____ request a refund of \$_____.

I understand and agree that a refund may not be made to me or be made in full or in part, having regard to the associated expenses already incurred by the school, and the school's [Refund Policy](#).

Reason	Name of Activity
Refund of excess credit on account. <i>Please enter your bank details and address below.</i>	
Non-attendance on excursion	
Excursion cancelled	
Other	

Refund type:

- I would like a credit applied to my student's account for existing / future invoices.
- I would like this deposited into my bank account as follows.

BSB: _____

Account Number: _____

Account Name: _____

Your Postal Address: _____

Signature of Parent/Guardian

Date

Please return this form to the Finance Counter at the B Block Student Services Centre or email to accounts@brisbaneshs.eq.edu.au.

OFFICE USE ONLY

APPROVED BY:

Name: _____ Signature: _____

Receipt/Inv No (supporting documentation attached): _____

OneSchool Parent Bank Account Details Report has been checked the day following data entry:
Refund generated on:

_____/_____/_____ by: _____

(Finance Officer)