

REQUEST FOR REFUND

PART 1

1. Filled by Participant

Name of the Participant / Employer	
NRIC / FIN / Corporate A/C No	
Contact No	
Email Address:	

Course Information

Name of Course Registered for	
Course Commencement date	
Total Course fee	
Paid Amount	
Invoice No	
Reason for cancellation	
Date of Request	

Declaration:

I, _____ / _____ / _____ (Name, NRIC/FIN and Signature), have read and understood the Eversafe's refund policy, terms and conditions before submitting this request.

2. Office Use

- A) Invoice No : _____
- B) Amount Paid : _____
- C) Mode of Payment : _____
- D) Eligible amount for refund : _____

Checked by	Approved by
_____	_____
(Admin In-charge)	(Managing Director)

3. Filled by Participant (Acknowledgement)

I, _____ (Name, NRIC/FIN and Signature) declare that I have received \$_____ in refund paid by cheque() on _____. I understand that this is subject to Eversafe's Refund policy, terms and conditions, which i have read and under stood at the time of submitting refund request.

4. Terms & Conditions for Refund:

- The Accountant shall process all approved course fee refunds.
- 80% of the course fee will be refunded, if cancellation is done more than [3] days before the Course Commencement Date
- 50% of the course fee will be refunded, if cancellation is done before, but not more than [3] days (Within 3 days) before the Course Commencement Date.
- 0 % will be refunded if the trainee fails to attend after, but not more than [1] days (same day)after the Course Commencement Date days (same day) after the Course Commencement Date
- 0 % will be refunded if the trainee fails to attend the course on the commencement date or discontinues mid-way through course. More than [1] days after the Course Commencement Date
- 0% to 100% may differ from case to case with valid reason and the Management's consideration.
- Processing time for approved refunds is seven working days.