Federal State School



40 Middle Creek Road FEDERAL 4568
PO Mail Service 1438 Pomona QLD 4568

Phone (07) 5480 8600
admin@federalss.eq.edu.au

REFUND POLICY

At Federal State School, we are committed to providing a safe and supportive learning environment for students, staff and volunteers. This commitment includes the health and safety of staff and students when conducting curriculum activities in the school or in other locations.

School excursions and camps enhance a student's learning by providing opportunities for the student to participate in activities, both curriculum-related and recreational, outside the normal school routine. All planned school excursions are approved by the Principal and endorsed by the Parents and Citizens Association.

State schools are able to charge a fee for:

- An educational service including materials and consumables not defined as instruction, administration and facilities for the education of the student;
- An education service purchased from a provider other than the school where the provider charges the school; and
- A specialised educational program.
- A school fee is directed to the purpose for which it is charged.
- School fees for excursions and camps are calculated on a cost recovery only basis, according to the number of students who have indicated their attendance.

Participation of students in an excursion or camp is indicated through payment of the excursion or camp fee and provision of a permission form completed by the parent/ carer. As the school budget cannot meet any shortfalls in funding for an excursion or camp due to the subsequent non-participation of a student who had previously indicated attendance of the activity, fees already paid for an excursion or school camp may be refunded in full or in part or not at all, having regard to the associated expenses incurred and the circumstances of the non-participation.



Signature of Principal / BSM

FEDERAL STATE SCHOOL REQUEST FOR REFUND

	•	efund, please complete and sign this from and return to the Please ensure that your bank details are
	npleted accurately as this bank account is a	
I, _	, I	peing the Parent/Carer of
	who is in Year, r	request a refund of \$
	paid for(a	ctivity)
l re	quest a refund due to:	
Lur	derstand and agree that:	
1.	I paid the amount I am requesting a refun	d for.
2.	 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 guidelines provided to me. 	
3.	. the school receipt for the original payment is attached / not attached. (Please circle)	
4.	. my details will be kept confidential and will not be used for any other purpose.	
5.	my refund will be made: as a credit against my child's account to my bank account via electronic fundaments.	
	Signature of Parent/Carer	Date
	Bank Accoun	t Details (for EFT refund):
	Account Name:	
BSB: Account Number:		
Bank:Branch:		
	Email:	
/Sc	nool Office Use Only)	
(30)		Invoice Amount: \$
-	pice Number:	
Inv	oice Number:ginal Receipt Number:	
Inv		Amount Receipted: \$

Date