WESTGROVE PRIMARY SCHOOL
PARENT REFUND POLICY

PURPOSE

To ensure there is a fair and equitable refund system in place following payment for Essential Student Learning Items, camps, excursions and incursions which have not been fully accessed.

AIM

To provide guidelines in determining eligibility for a part or full refund for monies paid to the school and to ensure that the payment does not disadvantage the school in any way.

IMPLEMENTATION

Refunds will only be processed upon receipt of the Parent Payment Refund Request form.
Refunds are preferably made by crediting the amount to the parents school account for future use, or if the student is exiting the school payment will be by cheque.

Camps, Excursions and Incursions

Refunds will only be given in the following circumstances:
- o The activity or excursion has been cancelled by the school.
- o The school does not permit the student to participate or attend the activity or excursion due to suspension or behavioural consequence, or any other exclusion.
- o Illness or injury is preventing the student from participating in or attending the excursion, on receipt of a medical certificate.
- o The students place is able to be taken by another student.
- o No financial loss has been made by the school

Essential Student Learning Items

Where payment has been received by the school for the Essential Student Learning Items and the student is exiting the school a pro rata refund for the School Supplied Essentials and Additional Technology Resources portions of the Essential Student Learning Items will be offered.

EVALUATION

This policy will be reviewed annually by School Council to confirm/enhance internal control procedures.
Proposed amendments to this policy will be discussed with the Finance subcommittee.

This policy was ratified by School Council in September 2020

Westgrove Primary School
Request for Parent Refund

Student Name …………………………………………………………………Grade …………..…………..

Amount ……………………………………. Activity Name …………………………………………………..

Reason for Refund …………………………………………………………………………………………..

Payment Type : Credit to Account/Cheque (Please Circle)

Parent Signature……………………………………………………………. Date…………………………………………..

Address……

Office Use Only

Family Code _____

Fee Code _____ Subprogram_____

GL Code _____ GST Code _____

Invoice Batch No _____

Credit Note or Refund Amount _____

Credit Batch No _____

Was credit allocated to another invoice? _____

(Activity or Essential Student Learning Items)