

Refund Request Form

Important Information

As outlined in the Working with Children (WWC) Check application form, the fee for an Employee Check is **non-refundable**. The granting of a refund is at the discretion of the department and is not guaranteed. If a decision is made not to issue you with a refund, you will be notified in writing.

If your application for a refund is approved, your bank account will be credited electronically.

Please note: If you have already been issued with a card, you will need to return this card to the WWC Check Unit before a refund will be issued to you.

Please allow 4-6 weeks for your refund application to be processed.

Please send this completed form with a copy of your Australia Post payment receipt to:
Working with Children Check Victoria
Department of Justice and Community Safety
GPO Box 1915
MELBOURNE VIC 3001

If you need assistance with completing this form and making a request for a refund, please call the Working with Children Check Customer Support Line on 1300 652 879.

Your details

If you do not provide all relevant details, we may not be able to process your request. Please note that we will use the information you provide to update our records if appropriate.

PLEASE USE BLACK INK ONLY.

* Applicant's name:	
* Nominated mailing address:	
* Contact telephone number (during business hours):	
Email address (if applicable):	
* Application Receipt/ Card Number:	

Provide your account details below. Your refund will be credited to this account if your request is approved.

Account in the name of:											
BSB code:	<table border="1"><tr><td></td><td></td><td></td><td>-</td><td></td><td></td><td></td></tr></table>				-						
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Account Number:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Financial Institution Name:											

Reason for request for a refund:

Please read the options below carefully and tick **one** option that applies.

- ☐ I do not engage in child-related work for profit or gain and believe that I paid the application fee in error- I require a **VOLUNTEER** Working with Children Check card.
- ☐ I do not engage in child-related work for profit or gain and believe that I paid the application fee in error- I **DO NOT** require a Working with Children Check card.
- ☐ I am engaged in child-related work for profit or gain and hold a current Employee card- I applied for a second Employee card in error.
- ☒ Other- Please detail the reason for your request for a refund in the space below.
If more space is required, please attach additional pages.

APPLICANT HAS APPLIED FOR/HAS AN NDIS WSC CLEARANCE

Declaration:

The information I have provided above is true and correct. I authorise the Working with Children Check Unit to process or amend my application for a Working with Children Check as applicable.

Signature: _____ Date: _____

It is a criminal offence under section 39 of the Working with Children Act 2005 to provide false or misleading information in relation to an application for a Working with Children Check.

Privacy Information:

Working with Children Check Victoria is bound by Victorian privacy laws (*Privacy and Data Protection Act 2014* and *Health Records Act 2001*). For further information visit our website at www.workingwithchildren.vic.gov.au

