Refund Request Form

Please complete the following and return to:

Office of Summer Session/Winter Session
1401 East University Blvd.
Administration Building 221
P.O. Box 210066
Tucson, AZ 85721-0066

All refund requests must be submitted in writing. Your request will be approved or denied based on the reason for the request and the supporting documentation. You will be notified, in writing, of the final decision. Do you prefer to be notified by: regular mail _____ email _____

Date: _______________ Student ID Number: ____________________________

Student Name: _____________________________________________________

Local Address: ___________________________________________________ Zip: ___________

Local Phone: _______________ Email: _________________________________

Course Number: _____________ Session: Pre I II Winter

How did you drop your course? Web Reg Change of Schedule Form

Note: Course must be officially dropped
Refunds cannot be issued on courses in which a grade has been given

Please use the space provided below to explain why you think your situation entitles you to a refund after the published refund deadline. Extenuating circumstances such as illness or death in the immediate family require additional documentation, i.e., medical excuse from attending physician or death certificate. Requesting a refund for only one course using a medical/death excuse is not acceptable. ALL courses for the session in which the refund is requested must be dropped in order to request a medical or death emergency refund.

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Please use reverse side if additional space is required.

Office use only:

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Approved</th>
<th>Denied</th>
<th>Letter to student</th>
<th>Memo to Bursar</th>
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</thead>
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Modified 01/06/09