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| **STUDENT TUITION/FEE APPEAL** |

Students are **responsible** for charges and payments to their student tuition/fee account. If you do not enter a class for which you are registered, you will be marked as a **No Show.** Students will not be refunded for classes for which they have been marked as a **No Show**.

**Appeals for the current and/or immediate prior term only will be considered and reviewed. All other appeals will not be considered. Decisions of the Appeal Committee are final. Book charges may not be appealed.**

Certain mitigating circumstances may qualify for a refund of tuition and fees paid to FTCC. Mitigating circumstances may consist of the following:

* Death of an immediate family member. A copy of the death certificate is required.
* Medical emergency which results in the inability to attend class. Medical documentation is required. Please attach medical documentation including the dates of illness or admission to the hospital and/or a signed letter from the doctor.
* Unanticipated military service, including TDY, training, activation for deployment and unanticipated reassignment. Proof of orders is required.

For any other mitigating circumstances, students should complete and submit this form with all supporting documentation.

Requests for a tuition refund will be reviewed by the Student Tuition/Fee Appeal committee. If denied, a letter will be mailed within a week after the after the Appeals Committee meeting.

**Financial Aid Students:**

A dropped class will result in a change in enrolled credit hours, which could generate a refund or a requirement to repay financial aid. Please contact the Financial Aid Office at (910) 678-8242 or finaid@faytechcc.edu with any questions regarding your financial aid prior to submitting this form.

Please review this document and complete the section below. Return document(s) by one of the following methods.

* In-Person: Registration Records Office, SDC 124, Main Campus
* By Mail: Registration & Records Office, FTCC, PO Box 35236, Fayetteville, NC 28303-0236

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| Which semester are you seeking a refund for?  |       |
| Please indicate course(s) Title, Course Number and Section Number:  |
|       |
| Please provide a detailed explanation requesting a refund. **Please use additional sheets if necessary**.  |
|       |
| What is your desired outcome? |       |
| Student Name: |       | ID#: |       |
| Current Address: |       |
| City: |       | State: |       | Zip Code |       | Phone #: |       |

***All documentation necessary for the appeal must be submitted with this form. Appeals that are denied due to lack of documentation will not be reviewed again. All appeal decisions are final and binding on the student. Your signature below is an acknowledgement that you understand the policies and procedures of the Tuition Refund Appeal process and agree to be bound by them.***

Student Signature Date

**Appeal Committee Evaluation and Results**

**Committee Review Date:**

**REFUND GRANTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Request full refund / \_\_\_\_\_ credits**

Which semester(s)? Spring Fall \_\_\_\_\_\_ Summer \_\_

Which course(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFUND DENIED:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Reason(s) Listed Below:**

\_\_\_\_\_ instructor withdrew student from class(es). Instructor

 administrative withdrawals do not generate a tuition

 refund for the student

\_\_\_\_\_ time to appeal has expired

\_\_\_\_\_ failed to drop course(s) during Add/Drop Period.

\_\_\_\_\_ already received the correct tuition refund

\_\_\_\_\_ the documentation provided does not support the appeals claim

\_\_\_\_\_ the medical documentation provided does not support the appeals claim

\_\_\_\_\_ received financial aid and will have to repay the funds based on federal requirements