

**RETROACTIVE COURSE CANCELLATION & TUITION REFUND APPEAL**

**INSTRUCTIONS:** Retroactive course cancellation and tuition refund appeals are granted only in cases of rare and extreme circumstances and are not granted for failure to cancel, nonattendance, or employment. Before completing this form, you should meet with an advisor to discuss options, including taking incompletes in your courses. If you decide to proceed with the appeal process, you must:

- Cancel course(s) before submitting this form if prior to the beginning of the ninth week of regular semester class (last day to cancel a semester class).
- Complete Sections A, B and C below;
- Attach the required supporting documentation and personal statement; and
- Submit this information to the **UMC Office of the Registrar, 9 Hill Hall, 2900 University Ave., Crookston, MN 56716.**

If you have, or think you have, a disability related to this tuition refund appeal, consult with the Disability Services Office at 218-281-8587 or 270 Owen Hall prior to the completion of this form. If your appeal is approved, the course grade W (for Withdrawal) will remain on your academic record for each course. If you are an international student, contact the International Student SEVIS Compliance Officer, 7 Hill Hall, before submitting this form.

The decision regarding your appeal will be emailed or mailed to you in approximately 2-4 weeks. Decisions are not available over the phone. Questions regarding this form or the appeal process can be directed to the Office of the Registrar.

**DEADLINE:** Your appeal must be received no later than August 31 of the academic year for which you are submitting the appeal because that is the end of the fiscal year. Accounting practices and compliance with regulations restrict our ability to process tuition refund appeals beyond the end of the fiscal year. (Example: Appeals for a semester in the academic year of 2015-16, (fall 2015, spring 2016, or summer 2016) must be received by August 31, 2016).

SECTION A: Student Information			
student name: last	first	middle	telephone #
current mailing address street or post office box	city	state	zip code
Full & Partial term/year of cancellation <input type="checkbox"/> fall 20_____ <input type="checkbox"/> spring 20_____ <input type="checkbox"/> May/summer 20____	Personal e-mail address (Print very clearly)		student ID #
SECTION B: Reason for Appeal. (1) Please check the box for the reason you are appealing and (2) attach a personal statement regarding your reason for appeal, as well as (3) the required documentation listed in the box below. Any documentation you provide is protected by Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA).			
<input type="checkbox"/> Medical	Your physician must complete the medical supplement on the next page and you must sign the authorization for release of medical information on that page.		
<input type="checkbox"/> Death in immediate family	Copy of death certificate required.		
<input type="checkbox"/> Military activation	Copy of military activation orders.		
<input type="checkbox"/> Academic advisement	Letter on University stationery from college office or adviser indicating that incorrect information was given by a University representative.		
<input type="checkbox"/> Extreme Circumstances	Events that are beyond an individual's control at a magnitude that prevents course completion. Documentation is required.		
SECTION C: Student Certification			
<input type="checkbox"/> I am not receiving, or did not receive, financial aid for the term/year listed in Section A. (Financial aid includes loans, grants, scholarships, tuition benefits, and fellowships.)			
<input type="checkbox"/> I am receiving, or did receive, financial aid for the term/year listed in Section A. (NOTE: If your circumstances require you to withdraw/drop from some or all courses, you are encouraged to contact a Financial Aid Counselor and your academic adviser so your decision will be based on a clear understanding of the consequences of withdrawing from courses.) I understand that in most cases retroactively canceling courses will result in being billed for financial aid that has been disbursed based on my original enrollment.			
I understand that any approval resulting in a reduction or removal of the student services fee or the University-sponsored Health Benefit plan will make me liable for any outside health insurance claims.			
<b><i>By signing this form, I am certifying that the information I provided is true. I understand that misrepresentation of facts or documentation may be sufficient cause, in and of itself, for automatic denial of this appeal and may be in violation of the Student Conduct Code. I have read and understand the statement above, and do so attest as documented by my signature on this date.</i></b>			
Student signature			Date

for office use only

approved? [ ] yes [ ] no	results of decision		
effective date of refund	term/year	by	date

# COURSE CANCELLATION & TUITION REFUND APPEAL MEDICAL SUPPLEMENT

**INSTRUCTIONS FOR PHYSICIAN:** This form is to be used to help the student with documentation for an exception to the University of Minnesota's tuition policy. When completing this form, you will be asked to rate conditions on a scale of mild, moderate, or severe. Please use these ratings to indicate the usual state of severity of the conditions during the illness period. *Mild* is intended to indicate impairment in functioning greater than would be expected for a college/university student, leading to some impairment in studying and /or missing of classes. *Moderate* indicates further impairment in functioning that is not excessive or extreme. *Severe* indicates extreme difficulty in functioning and complete inability to attend class or study. If additional space is needed, attach a separate letter on letterhead providing further information.

student name: last	first	middle	student ID
<b>To be completed by physician/medical professional</b>			
1. Patient was seen for medical condition on (list all dates):			
2. State your diagnosis:			
3. Length of treatment:			
4. Was the student physically/emotionally incapable of attending class(es) during the term of the illness? [ ] Yes [ ] No			
5. Rate the severity of how the illness impacted the student's daily functioning during the term of the illness: [ ] Mild (less than 2 weeks) [ ] Moderate (2-6 weeks) [ ] Severe (more than 6 weeks)			
6. List specific symptoms and how they prevented the student from attending class(es):			
7. Extent of the illness or injury as it relates to the student's ability to participate in class: <input type="checkbox"/> Hospitalization (including day hospitalization) required (from _____ to _____) <input type="checkbox"/> Confined to bed (from _____ to _____)			
8. If this condition is a continuation of a prior condition, did the student suffer a relapse, have complications, or require a change in medication that affected her/his ability to attend classes: If yes, explain and give the date this was diagnosed:			
9. Rate how the student's illness affected the following daily functions: Ability to concentrate: [ ] Mild [ ] Moderate [ ] Severe [ ] Not applicable Ability to sleep: [ ] Mild [ ] Moderate [ ] Severe [ ] Not applicable Ability to attend class or study: [ ] Mild [ ] Moderate [ ] Severe [ ] Not applicable Energy level: [ ] Mild [ ] Moderate [ ] Severe [ ] Not applicable Other _____: [ ] Mild [ ] Moderate [ ] Severe [ ] Not applicable			
10. Did you recommend ongoing treatment/therapy? [ ] Yes [ ] No		If yes, how often is/was the required treatment: [ ] Daily [ ] Weekly [ ] Monthly [ ] Other _____	
11. On what date do you believe the student can/could have resumed normal daily activities, including attending class(es)?:			
12. Other comments pertinent to the student's circumstances:			

By signing this form, you are certifying that the information you provided is true to the best of your knowledge.

Physician's Name/title	Date
Physician's Signature	Phone number
Name and Address of Agency or Medical Provider (e.g., Altru Health, Crookston, MN)	

Signature of student authorizing release of medical information.

Student signature	Date:
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# RETROACTIVE COURSE CANCELLATION & TUITION REFUND APPEAL

Request to Cancel Classes:

Check here to cancel ALL classes.

Check here to cancel individual classes (provide the course information below):

Term / Year	Course #	5 digit class #

Personal statement regarding your reason for appeal (attach additional pages if necessary):

## Procedures

Students may appeal for an exception to the University refund policy if unusual circumstances exist. The student must complete a Retroactive Course Cancellation and Tuition Refund Appeals form if there are extenuating circumstances that have prevented the student from dropping his or her semester course work and warrant exception to the refund procedure. All tuition refund petitions, written and signed by the student, and accompanied by supporting, official third-party documentation, are to be submitted to the Office of the Registrar. In order for an appeal to be considered, the student must prove extenuating circumstances were the sole cause of withdrawal from classes. The responsibility to supply adequate supporting documentation lies with the student. If the student is requested to provide additional documentation in order for the University to make a final decision, the student will have 30 days to submit the additional documentation or the appeal will be denied. The Committee will typically only consider appeals written and submitted by the student; appeals submitted by someone other than the student (e.g., parent, guardian, sibling, etc.) will typically not be considered. Appeals should fully explain the extenuating circumstances and include supporting documentation. The submission of an appeal does not guarantee approval.

The Registrar decides routine appeals that meet established criteria. Appeals that fall outside existing criteria, and appeals of Registrar decisions, are referred to the Tuition Refund Appeal Committee (TRAC) for review. Students who wish to appeal the decision of the Registrar must do so in writing within 10 calendar days after receiving the decision. The Tuition Refund Appeal Committee will then review such appeals.

The TRAC is an administrative committee appointed by the Chancellor and comprised of representatives from the Business Office, Student Affairs, and Financial Aid and Scholarships. The committee is chaired by the Registrar who serves without a vote. TRAC meetings are typically held on the third Thursday of each month. Appeals are reviewed in the order received. Appeals **must** be received no later than the first Thursday of the month to be reviewed at that month's meeting. Appeals submitted after that date would be reviewed at the following meeting. Students will receive written or email confirmation that his/her appeal form has been received. The confirmation will inform the student of the date on which the Committee will review the appeal.

The Office of the Registrar will prepare a packet of information that includes the student's petition and documentation, academic history, current semester's schedule, student account balance, and the financial aid status for the student. The University may contact third-party documentation providers to verify information provided by the student. The Committee may also contact the student's instructor(s), adviser, department head, and/or any other university personnel and to inquire as to attendance record, current grade in the course(s), assignments completed, or other university interactions as they relate to the appeal request. Materials are confidential and shared only with members of the Committee who review the appeal. The TRAC will research, review, and render a decision to the request. Appeals are approved by a majority of the committee voting in favor of the request. Once the Committee has reached a determination, the student will receive a letter or e-mail **within seven working days** indicating the Committee's disposition of the appeal.

The Committee will **NOT typically** consider appeals based on the following reasons:

1. Registering for the wrong course. It is the student's responsibility to verify accuracy of course prerequisites or required courses, course schedules, required texts or other supplies, course content and appropriateness of course level, catalog requirements, and registration.
2. Any case that involves a protested check or any account that has been turned over to a collection agency or the state of Minnesota.
3. Misinterpretation, lack of knowledge, understanding, or failure to follow applicable University policies and procedures as published in the University Catalog, Class Schedule, official University website <[www1.crk.umn.edu/](http://www1.crk.umn.edu/)>, or other applicable University publications.
4. Dissatisfaction with course content or delivery of instruction.
5. Dissatisfaction with academic progress in course.
6. Appeals of non-refundable fees.
7. Non-attendance or minimal attendance of class.
8. Inadequate investigation of course requirements prior to registration and attendance.
9. Non-qualification, late application, or loss of eligibility for financial aid or scholarships.
10. Non-receipt of mail due to obsolete address on file with the Office of the University Registrar.
11. Failure to activate or maintain the student's official UMN.EDU e-mail account (e-billing).
12. Changes of, or personal conflicts with, the instructor of record.
13. Student errors resulting in the delay of administrative processes relative to registration or the delivery of financial aid funds.

14. Voluntary acceptance of employment or other activity influencing ability to attend classes.
15. Textbook, software, hardware, or technical difficulties.
16. Routine illness.
17. Lack of preparation or failure to meet course prerequisites.
18. Vacation plans.
19. Personal errors in judgment or irresponsibility involving transportation, childcare, availability of finances, academic ability, and time management.

If a student has documentation that substantiates an extraordinary event and an appeal for tuition and fee refund is approved, the student must understand that the University is only able to approve a refund appeal once during the entire academic career at UMC (includes all voluntary and involuntary separations). In particular, if the event is related to a medical condition, it is the student's responsibility to make an informed decision (which may require a consultation with a healthcare provider) prior to enrolling in future coursework since an appeal is granted on a one-time basis for a given medical condition. While a student may not be granted a second tuition and fee refund the student may have the opportunity to withdraw from coursework with a grade of W in future semesters, assuming the student meets all appropriate deadlines and regulations related to withdrawal.

The Tuition Refund Appeal Committee does not review tuition refund exceptions when the basis of the appeal is related to the academic delivery, instructor conflicts, grading, or any academically related request for refund exception. Any and all academic grievances must follow the **UMC Student Grievance Procedures** <<http://www3.crk.umn.edu/info/policies/grievance.htm>>.

**Financial Aid Recipients Note:** If an appeal is approved for a recipient of federal and/or state financial aid (grants and loans), and the student's original course registration is cancelled and/or tuition liability is eliminated as a result; federal/state regulations dictate that all financial aid previously applied to the student's account and/or disbursed to the student in the form of an overpayment refund, must be recalculated under the Federal Return to Title IV, state and institutional policies. This action may result in an outstanding balance on the student account; in certain scenarios, that (new) balance owed may be in an amount greater than was incurred via the initial registration/aid disbursement.

**Spouses of Service Members Called to Active Duty:** Students who are the spouse of a service member and have a dependent child are able to withdraw from classes with a full refund of tuition if their spouse is called to active duty. The same terms and conditions apply to these students as to the service members. Students must present the service members' orders to their college and University Veteran Services to begin the process of reimbursement.

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## History

Approved by Chancellor's Administrative Cabinet, November 22, 2010

Revised June 28, 2012; March 25, 2013; August 26, 2013; July 24, 2014