



Central Connecticut State University
Tuition Refund Appeals Committee
c/o Office of the Registrar

Tuition Refund Appeal Form

Central Connecticut State University's policies on refunds of tuition charges can be found on our website at:

<http://www.ccsu.edu/bursar/refundPolicy.html>

Students may complete this form after they have formally dropped or withdrawn through the Office of the Registrar **only if** there are significant or unusual circumstances outside of their control that causes **involuntary** withdrawal from any or all classes. This appeal form must be accompanied by supporting documentation and must be completed by the student in accordance with the *Family Educational Rights and Privacy Act of 1974 as amended (FERPA)*.

An appeal submitted on behalf of a student (i.e. parent, counselor, doctor, etc.) will not be considered.

Please note: This form is to be used for tuition and fee appeals associated with course registration only. Appeals related to Residence Life (housing and meal plan) charges must be initiated through the Residence Life contract cancellation process:

<http://www.ccsu.edu/reslife/forms.html>

Part One: Student Information

Name: _____ Student ID#: _____

Mailing Address: _____

E-mail Address: _____ Phone #: _____

Part Two: Appeal Information & Supporting Documentation

Semester: _____ Course(s) associated with appeal: _____

Appeal Category (check one):

- Medical (*Illness/Injury*)
- Military Duty
- Extenuating Circumstance (*beyond the control of student*)
- Never attended CCSU for the semester being appealed

Required Documentation:

- Typewritten statement from student that details the basis for appeal and associated circumstances
- Third-party documentation that supports your basis for appeal (*examples: letter from healthcare provider, accident report, obituary, military orders, verification of never having attended CCSU for the semester being appealed, etc as appropriate for your appeal category*)

Part Three: Student Certification

I understand that by retroactively canceling courses I may be billed for financial aid that was disbursed to me based on my original registration. All information provided as part of this appeal is true to the best of my knowledge.

Student Signature: _____ Date: _____

The Tuition Refund Appeals Committee attempts to respond to student appeals within 2 weeks of submission. Decisions will be communicated to students via their CCSU e-mail account and/or a mailed paper letter.

Submit a completed appeal to:

Refund Appeals Committee, c/o Office of the Registrar

Willard-DiLoreto, Room D 202, Fax (860) 832-2250, E-mail regstaff@ccsu.edu