REFUND COMMITTEE REQUEST FORM

The Undergraduate and Graduate Bulletins explain situations in which a student is eligible for a refund of tuition, fees, room, and board. If a student is not eligible for a refund based on current refund policies, they may request a review by the Refund Committee. It is the student’s responsibility to provide written documentation from a reliable source that supports the refund request. If the request involves a health-related matter, documentation from the attending physician is required. The Committee will not review cases that are more than one year old. If the student never attended classes for which they are appealing, undergraduate students may contact Student Academic Services and graduate students may contact the Graduate School.

Please return this completed form, along with any written supporting documentation, to the UNCG Cashiers and Student Accounts Office, P.O. Box 26170, Greensboro, NC 27402.

Name: _____________________________________  Student ID Number: __________________
Mailing Address: ________________________________________________________________
City: __________________________ State: ________ Zip Code: _____________
Phone Number: ________________  E-Mail Address: _________________________________
What was your last date of class attendance? _________________________________________
Please answer the following: (1) Semester for requested refund: _________________________
(2) Are you an Undergraduate or Graduate? (Please circle one)
(3) Is this your 1st semester at UNCG? Yes or No (Please circle one)
Reason for Request: ______________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
Student’s Signature: __________________________________________
Date: ______________________________________________________