Student Appeal for Tuition Refund

E-mail: StudentAppeals@frederick.edu  Fax: (301)624-2799
Phone: (301)846-2431

Student ID#__________________________________
Name ____________________________ ____________________________________________
Address __________________________________________City, State, Zip ______________________________
Phone ___________________________________________ myFCC e-mail only __________________________________________

Please enter the course information for which you are appealing:
Course__ Term__ Student Reported Last date of Attendance __________
Course__ Term__ Student Reported Last date of Attendance __________
Course__ Term__ Student Reported Last date of Attendance __________
Course__ Term__ Student Reported Last date of Attendance __________

In addition to this form you must:

1. Officially withdraw from class(s). (REQUIRED)
2. Gather supporting documentation- including but not limited to a letter from your medical provider, court
documents, or military orders. These papers must include dates relevant to your appeal. You must prove that
you were unable to complete your class(s). (REQUIRED)
3. Prepare a typed statement on separate paper to explain the details of your petition. (REQUIRED)

Please read carefully before submitting this form. Any student facing extenuating circumstances during a semester resulting
in withdrawal from credit classes may submit an appeal to the Tuition Refund Committee. The Committee will evaluate petitions for
situations occurring after the posted refund period. Any student who receives partial refund is not eligible to appeal for further tuition refund. Petitions will only be considered if they are submitted before the end of the academic calendar year. The academic year ends with spring term. Appeals will not be considered if they are submitted after this time frame. You must be withdrawn from the course(s) before you submit paperwork. If the date to withdraw has passed you will need to appeal to the Admissions and Academic Policies Committee and receive approval before you submit this form. The TRC meets every other month. Once a decision has been reached, you will be notified by either your myFCC e-mail or by mail.

I have read the above statement and have met all of the requirements.

__________________________________________________________________________
Student Signature  Date

Return form and accompanying documentation to:
Tuition Refund Committee, Box 202
Frederick Community College
7932 Opossumtown Pike
Frederick, MD 21702
E-mail: StudentAppeals@frederick.edu

For Office use only

<table>
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<th>Course</th>
<th>Faculty reported last date of attendance</th>
<th>Drop/Withdrawal date</th>
<th>Deadline to withdraw for refund</th>
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Date appeal received-  Appeal results-  Student notified-