



REFUND REQUEST FORM

****Please note your request will not be reviewed until all documents are received and you have withdrawn from the class(es).**

STUDENT INFORMATION:			
Name:		Student @ ID #	
Address:		Phone:	
City, State, Zip			
Student Email Address:	@students.coconino.edu		
Only CCC student email address will be used to correspond with student			

COURSE ENROLLMENT INFORMATION: (withdrawal from class required):			
Course #(s) / Section(s)	CRN #(s)	Semester / Year	Instructor(s)
Example: ENG 095 - 01	13296	Fall 2020	Mary Smith

Reason: (check appropriate reason and supply backup documents as noted below each reason)

PLEASE ATTACH A PAGE WITH A COMPLETE DESCRIPTION OF WHY YOU ARE REQUESTING A REFUND

Death of immediate family member <ul style="list-style-type: none"> Include obituary which indicates your relation to deceased 	Death of student <ul style="list-style-type: none"> Include death certificate 	Military Service <ul style="list-style-type: none"> Include military orders
Serious Illness of Student/Immediate Family Member <ul style="list-style-type: none"> Include statement from doctor indicating illness causes you to be unable to participate in class 	Other: <ul style="list-style-type: none"> On attached page describe reason for request & include documentation to support reason 	

A decision will be made within 2 weeks of receiving your request and ALL documents. You will only be contacted at your student email address regarding this decision, please check your student email regularly.

Student Signature: (required) _____ Date: _____

	Approved	Denied
Comments (internal use only):		
Student Accounts Manager:		Date:

TYPES OF REFUND REQUESTS AND SUPPORTING DOCUMENTATION

The deadline to file a refund request is the end of the following semester provided the student meets the refund request criteria.

- **REFUNDS FOR SERIOUS ILLNESS OF STUDENT OR IMMEDIATE FAMILY MEMBER**

A refund request will be accepted for review by the refund committee for those students or family members suffering from a serious illness or injury that necessitates a withdrawal from class(es). The student must produce a verifiable doctor's statement certifying that the illness/injury prevents the student from attending class(es).

- **REFUNDS FOR DEATH OF A STUDENT, SPOUSE, PARENT, OR CHILD**

A 100% refund will be made to the student or the student's estate in the event of death of the student or student's spouse, parent, or child that results in a withdrawal from all of the student's classes. The student or the student's family must provide a death certificate or newspaper Obituary Notice with proof of the relationship (i.e. Birth Certificate, Marriage License, etc.)

- **REFUNDS FOR MILITARY SERVICE**

A student belonging to the Armed Forces or the Arizona National Guard who is called to active duty and assigned to a duty station will be allowed to withdrawal and receive a 100% refund of tuition and fees provided the course(s) has not been completed for which refund is requested. The student must provide a copy of the military orders.

- **REFUNDS FOR NON-CREDIT COURSES**

Non-credit courses are non-refundable. Students who can provide proof of one of the three above exceptions, must submit a Request for Refund to the Student Accounts Office for the committee's review.