



PETITION & TUITION REFUND APPEAL FORM

Petition # _____

DATE: _____

Student Name _____ Student ID _____
Address _____ City _____ State _____ Zip _____
Telephone Number _____ Cell Phone Number _____ MCC E-Mail _____@muskegoncc.edu

STEP 1: Semester of Appeal: _____
PLEASE NOTE: All Petitions & Tuition Refund Appeals must be received no later than one semester after the course(s) were taken.

STEP 2: It is suggested for you to meet with a counselor to discuss your options.

If you decide to proceed with the appeal process, you must follow these steps:

STEP 3: Are you receiving Financial Aid (includes grants, loans, scholarships, work study and tuition benefits)? ____Yes ____No
If yes – **STOP** – you MUST speak to the Director of Financial Aid or a Financial Aid representative at 231-777-0228.

Financial Aid Rep Signature: _____ Date: _____

Recommendation: _____

STEP 4: Withdraw from course(s) before submitting this form unless you are appealing a residency change.

Please check one (unless Residency Change):

- I have withdrawn from ALL of my courses for the semester listed above.
- I am only appealing the following classes: _____

STEP 5: Attach a typed statement explaining the reason for the petition. Also, attach the required documentation according to the petition type. (See documentation list below.) **MCC will not contact you for documentation.** If documentation is not attached, the petition will be processed only with the information you supply. Petitions are not reviewed a second time with new information. **Do not FAX any information.**

STEP 6: Submit this completed form with documentation to the Student Welcome Center at the address on the back of this form. Make sure you sign and date the form.

Please check the appropriate box for the basis of your petition and provide the appropriate documentation

- Course Related Issues:** If your petition is based on issues directly related to the course there are three steps. 1) Discuss these issues with the instructor, 2) the appropriate department chairperson, and 3) Dean of Instruction and Assessment or Vice President for Academic Affairs. Please provide a written decision from the Academic Affairs Division on College letterhead.
- Military Duty:** Induction of the student into US Military. Submit the induction notice or your military orders that clearly displays the date of induction or call up.
- Withdrawal Illness:** A physician or mental health professional must describe in writing your medical condition (whether injury or illness), how it has incapacitated you, and recommending withdrawal of all classes or specific classes and why. This statement must be on the provider's letterhead and signed by the health provider. Excuse slips, copies of invoices, appointment confirmations, statements of insurance payments, etc. are **not** acceptable documentation.
- Withdrawal Illness - Bereavement:** Death of an immediate family member or death of the student: Submit a death certificate, obituary, or death notice. Documents **must** clearly indicate the relationship of the deceased to the student.
- Verifiable Error of MCC:** Provide a detailed account of the problem and relevant documents on College letterhead from the College Office involved or advisor indicating that incorrect information was given by a College representative.
- Residency Change:** Provide a completed Student Personal Data Change Request Form and proof of residency for at least six months prior to the semester being appealed.

Other (Please list): _____

Read these statements carefully:

- I am applying for the Petition & Tuition Refund Appeal. I have attached all the documentation that I want reviewed. I assume all responsibility for the enrollment changes that may occur.
- I understand that by submitting this Petition & Tuition Refund Appeal I may owe money back to MCC for my tuition, fees, and bookstore purchases. If I receive(d) financial aid, I have spoken with the Director of Financial Aid or a Financial Aid representative.
- I understand that if I receive enrollment certifications for insurance purposes I may be contacted by my insurance company and my eligibility for insurance and coverage may change if the refund appeal is approved.
- I have withdrawn from the class(es) being appealed and am no longer attending. Once this Petition & Tuition Refund Appeal is submitted, the process is irreversible. If the Refund Appeal is denied, my original withdrawal grade of 'W' will remain for the class(es). (Waived if petitioning for a Residency Change).
- I understand that the decision of the Student Services Council/Petitions Committee is final.

By signing below, I indicate that I understand each item above and I am certifying that the information I am providing is true. Misrepresentation of fact or documentation may be sufficient cause for automatic denial of this appeal and may be in violation of the Student Conduct Code.

Student Signature: _____

Date: _____

The Student Services Council is the governing body that decides Petition & Tuition Refund Appeals. It meets on the third (3rd) Tuesday each month. If you would like to attend the meeting when your Appeal will be reviewed, please contact Patti D'Avignon, Manager of Registration, 231-777-0240.

PLEASE NOTE: ALL APPEALS MUST BE SUBMITTED AT LEAST ONE WEEK PRIOR TO THE SCHEDULED MEETING TO BE REVIEWED.

(Submit this form and all documentation to the Student Welcome Center or mail to the address below)

**Student Services Petitions Committee
Muskegon Community College
221 S. Quarterline Road, Room 100-L
Muskegon, MI 49442**

<p><u>FOR OFFICE USE ONLY:</u></p> <p>____ STAC ____ FASI ____ ARAI ____ STRK ____ PERC ____ Drop info ____ Documentation ____ Reason Letter Semester: _____</p>	<p>Decision: ____ Approved with ____ Refund ____ Credit ____ No Refund ____ Denied - Reason:</p> <p>Notes:</p>	<p>____ Date Sent to Billing ____ Date Added to STRK Other Actions:</p>
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