

## **Application for On-Campus Course Transfer or Refund**

Please return this form to the Business Office, Room 301 (days) or to the Student Store, Room 601 (nights). Submission of the form does not guarantee any refund.

- A full refund of fees will only be made after the start of the term if a course is closed by the school or if the days and/or times of class are changed by the school and the student cannot attend.
- A prorated refund may be granted based on administrative approval and when during the course's semester this form is submitted.
- A transfer to the next semester of the same course may be offered based on the reason for the request.
  - **No refunds will be given on program application fees.**
  - **No refunds will be given on registration fees.**
  - **No refunds will be given on testing fees.**
  - **No refunds will be given on "A" portion once picked up from the ASB Office (including textbooks, uniforms, and other course materials).**
  - **No refunds will be given on a course after 25% of the scheduled class meetings are completed for that semester/term.**

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### **Part 1- Student Information**

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
                    Number/Street                      City                      State                      Zip

Course Title: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

Check one:     Request to transfer to next term.    or     Request for partial refund.

Student Signature: \_\_\_\_\_

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### **Part 2 – To Be Completed by SICE Staff**

Amount paid:            A \$ \_\_\_\_\_            B \$ \_\_\_\_\_            \*Attach sales receipt

Refund Granted:        A \$ \_\_\_\_\_            B \$ \_\_\_\_\_            and ASAP attendance.

Program Administrator: \_\_\_\_\_            Date: \_\_\_\_\_

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### **For Office Use Only**

Total Amount Refunded: \$ \_\_\_\_\_            \*Attach copy of check and ASAP receipt.

Method of refund:     Credit Card             Check             Outside Agency Refund:

Date Processed/Check Mailed: \_\_\_\_\_            SICE Staff Processing Refund: \_\_\_\_\_