



Instructions: Upon completion of Sections I to III, the student shall forward this form to the instructor for final dispensation. At her/his earliest convenience, the instructor is asked to kindly complete, sign, date, and return this form to the Office of Student Financial Services, Carnell Hall, Ground Floor.

SECTION I: STUDENT INFORMATION

Name (Last, First and Middle)	TUId
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SECTION II: COURSE FOR WHICH REFUND IS SOUGHT

Semester <input type="checkbox"/> Fall _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Summer I _____ <input type="checkbox"/> Summer II _____				
Department	Course Number	Section Number	Name of Instructor	Grade

SECTION III: STUDENT SIGNATURE

Signature of Student	Date / /
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SECTION IV: INSTRUCTOR VERIFICATION

It is my understanding that the student identified above has withdrawn from my class and is requesting a tuition refund for this course based on non-attendance. It is duly noted that the full refund period is defined as the first two weeks of the fall or spring semester and the summer sessions. I herewith certify that the named student:

- Never attended this class.
- Did not attend past the refund period for this class.
- Last attended the class on the following date: _____ .

SECTION V: INSTRUCTOR SIGNATURE

Signature of Instructor	Date / /
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