

**North Hennepin Community College
Appeal Tuition and/or Late Withdraw**

7411 85th Avenue North
Brooklyn Park, MN 55445-2299
Advising Center 763-424-0703
Financial Aid 763-424-0728

Last Name: _____ First Name: _____ Student ID: _____

Address: _____ City, State, Zip: _____

Email: _____ Phone: _____

Appeal Committee Decision

Approved – Please allow a minimum of ten working days for your academic and/or tuition balance records to be updated. You can check your account and/or academic record status via your eservices account.

A decision cannot be made at this time.

Denied – Your request was not approved. The circumstance described in your appeal is not a reason where an exception to policy can be approved.

The student is responsible for knowing and complying with NHCC policies and procedures including the college drop, withdraw and refund policy. Student error or misunderstanding of the drop and/or withdraw process is not a reason where an exception to policy can be approved.

The appeal deadline has passed.

Request must be accompanied by medical documentation written and signed by your health care professional on letterhead. It must **clearly** identify any dates that correlate with the situation(s) that prevented you from attending classes.

Medical appeals are only considered for significant, unanticipated student illness (or with appropriate documentation, direct dependents of the student). The situation described in the appeal is not one where a medical appeal request can be approved.

The required documentation was not provided.

Other:

If your request is currently within the appeal deadline and you have additional documentation to add to your appeal, send the additional information to the Advising Center and request a second review.

If you have questions regarding the appeal decision, please call 763.424.0703

Office Use:

Records	Accounting and Fees	Financial Aid
<input type="checkbox"/> No Review Needed	<input type="checkbox"/> Refund % Due to:	<input type="checkbox"/> No Review Needed
<input type="checkbox"/> Change courses to W: LDA:	Courses Approved: Term: F S SS	<input type="checkbox"/> R2T4 Needed

Appeal Instructions:

STEP 1: Contact the Advising Center to meet with an advisor to review your situation and identify the required appeal documentation.

Advisor Signature: _____

Date: _____

STEP 2: Identify the semester, type of request and classes to be reviewed:

Semester: Summer 20____ Fall 20____ Spring 20____

Request(s): Late Withdraw Tuition Refund

List Class(es): _____

STEP 3: Rationale for appeal and required documentation. Appeals without relevant documentation will be denied.

- Major Medical Issue – an unexpected, significant medical condition prevented attendance.
Documentation needed:
- Healthcare provider statement (signed and written on letterhead) that clearly identifies the dates and the situation that prevented you from attending classes. **Do not** provide copies of bills, appointments, prescriptions, etc.
- College Error
Documentation needed:
- College materials documenting the error or an employee written statement describing the situation.
- Military Call to Active Duty (a late drop may be requested if due to military call-up to active duty)
Documentation needed:
- Copy of DD-214
- Other
Documentation needed:
- Documentation that supports your request and that the circumstances were unforeseen and beyond your control or choice.

STEP 4: Provide a written statement (one page maximum) describing the situation in detail.

STEP 5: Read and sign below:

I have read and understand:

- Late withdrawals can result in aid recipients being required to **repay** financial aid for the semester.
- The appeal deadline is 30 days after the appeal term ended.
- Appeal results will be emailed to the email address above within 14 business days.
- **Requests based on the following situations will not be considered:**
 - Lack of knowledge of drop, refund, withdrawal or other college policies
 - Dissatisfaction with faculty, class or grade
 - Voluntary acceptance of employment or other activity impacting ability to attend classes
 - Disregarding course/placement requirements
 - Change in marital or relationship status
 - Did not attend course(s)
 - Incarceration or arrest
 - Inability to pay

Student Signature: _____

Date: _____

STEP 6: Return this form and the required documentation to the **Advising Center, ES-69**

Questions? Call Advising at 763-424-0703 or email advising@nhcc.edu