One-hundred percent (100%) of tuition and fees may be refunded when, within six (6) months of the end of the semester to which the refund is applicable, a student has withdrawn or dropped a course, and when cited clearly supported circumstances beyond the student’s control is approved by the University Registrar’s Office, under state-approved conditions (see below). In order to be considered for a fee adjustment, one of the conditions listed on this form must be met and documented. Submit this completed form and supporting documentation to the University of South Florida, Office of the Registrar, SVC 1034, 4202 East Fowler Avenue, Tampa, FL 33620.

This form cannot be acted upon until the course drop or withdrawal has been processed. Specify applicable term and year, sign and submit this completed form with a detailed explanation and relevant supporting documentation attached. Allow a minimum for 10 working days for the decision to reach you by mail or e-mail to your USF-issued e-mail address.

**COMPLETE ITEMS BELOW:**

- **A.** Applicable term and year ___________________________
- **B.** Fill-in identifying course information for which you are requesting consideration of a fee adjustment:

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- **C.** Check the conditions(s) which apply to this request:
  1. Illness of the student, confirmed in writing by a physician (M.D.), of such severity or duration to preclude completion of the course(s).
  2. Death of the student or immediate family member; i.e. parent, spouse, child or sibling, as confirmed by death certificate & obituary indicating the student’s relationship to the deceased.
  3. Involuntary or voluntary, confirmed by military orders, call to active military duty.
  4. A situation in which the University is in error as confirmed by the appropriate University official in writing on official USF College/department letterhead.
  5. Other exceptional circumstance beyond the control of the student which precluded completion of the course(s) accompanied by both an explanatory letter and verifiable written documentation clearly supporting the student’s explanation.

- **D.** Sign and submit this form with your detailed explanation and supporting documentation to the Office of the Registrar (Tampa) or the Records and Registration office on any regional campus. *By supplying your USF-issued e-mail address, you permit the Office of the Registrar to disseminate the decision to you via e-mail and forego a mailed copy.

**NOTE:** Do not use this form to request a partial (25%) refund in cases of withdrawal from all classes for non-exceptional circumstances after the end of the drop/add period but prior to the end of the fourth week of classes. Students must complete a Refund Request form in the Office of Finance and Accounting (ADM 106) for this category of refund. Special requests for an extension of the six (6) month deadline must include specific facts indicating special circumstances which (i) were beyond the control of the student (ii) clearly impaired the student’s physical or mental ability to correct their academic/financial record at the University and (iii) are supported by written explanation and verifiable documentation.

**FOR OFFICE USE ONLY**

[ ] Approved: ________ hours approve for full adjustment: Please note that students who either received or were reimbursed by financial aid (including student loans) should expect the tuition refund to be returned to those aid programs first until they are repaid in full. Students who paid by credit card should contact the Cashier’s Office, ADM 131 for credit/debit card refund and your credit card will be credited. Students who paid by cash/check should contact Refund Cash Accounting, ADM 125, 974-2999 or 974-6053. Refunds will take approximately 5 – 10 business days to process.

[ ] Denied. Reason for denial:

Signature of Student          Date

Signature of Authorizing Official          Date