

South Piedmont Community College
PO Box 126, Polkton, NC 28135
704-272-5300 or 704-290-5100 – Fax 704-272-5303
Curriculum Account Balance Appeal Form

Upon registering for classes, your account is billed for the full cost of tuition and fees. If you drop your class(es) before the start of the semester, you will receive a 100% refund. If you drop your class(es) after the start of the semester but during the Drop/Add period, you will receive a 75% refund. Anything after the Drop/Add period has ended is considered a Withdrawal (including Instructor-initiated Withdrawal and Administrative Withdrawal), and no refund will be granted. Refer to the current Academic Calendar (located in the Student Handbook, College Catalog, and SPCC website) for Drop/Add and Withdrawal dates. Drops and Withdrawals must be submitted to the Student Success Office for processing prior to these deadlines. Financial Aid will only be paid for the time you are present and attending your classes. For extenuating circumstances, please use this form to appeal your balance. Each appeal will be considered individually and is not guaranteed to be granted.

SSN/ID _____ Daytime Phone () _____

Name (Print) _____

Current Address _____ City, State, Zip _____

Email Address _____

Courses for which you are requesting refund: Fall 20__ Spring 20__ Summer 20__

Subject Prefix	Course #	Section #	Credit Hours	Course Title

Reason for request: _____

Please use the back of this form to provide any additional information **AND attach any documentation you have to support your request.** Allow up to 2 weeks for processing.

Student Signature _____ Date _____

----- OFFICE USE ONLY -----

Vice President of Student Success (or designee) check all that apply:

- | | | |
|--|---|--|
| <input type="checkbox"/> Never Attended | <input type="checkbox"/> Submitted to Collections | <input type="checkbox"/> 75% Refund Granted |
| <input type="checkbox"/> Counted for FTE | <input type="checkbox"/> No Refund Granted | <input type="checkbox"/> 100% Refund Granted |

Notes: _____

VP/designee Signature _____ Date _____

Initial/Date: Enter in Datatel (RO) _____ Run BILL (BO) _____ Notify Student (BO) _____