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**One Washington Square, San José CA 95192-0138**

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| --- | --- |
| Section 1: **Student Information** | |
| Name: | SJSU ID#: |
| Street Address: | City, State, Zip: |
| Home Phone: | Mobile Phone: |
| Semester: | Course(s) Dropped: |

|  |  |
| --- | --- |
| Section 2: **Type of Request** | |
| * Requesting Refund | * Requesting Reversal of Outstanding Charges |

Generally, all accepted extenuating circumstances fall into one of the following seven categories:

*Administrative Error Employment*

*Military (Orders from CO) Natural Disaster*

*Death of Immediate Family Member Personal Health or Serious Family Illness*

*Divorce*

In all cases, a signed personal statement and supporting evidence/documentation will be required. Incomplete petitions will not be processed.

**NOTE: ALL DOCUMENATION IS SUBJECT TO VERIFICATION**

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| Section 3: **Personal Statement** |
| In the space provided below, please give a detailed explanation why you are requesting a refund past the deadline. If you require additional space, please use the reverse side of this petition. *Once completed, return to the Bursar’s Office for processing.* |
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Student Signature Date