\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

|  |
| --- |
| 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**

|  |
| --- |
| 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.* |
|  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Date