

## **Application for Tuition Adjustment**

(For a Class in Dropped Status Only)

The deadline for application is one calendar year from the end of the term for which the adjustment is requested.

**Notes:** 

DD-MMM-YYYY

**User Initials** 

• This is an application for a tuition adjustment if your withdrawal from class(es) was for one of the following reasons:

Serious illness or accident • Death or serious illness of an immediate family member • Hospitalization as a result of serious illness or accident • Involuntary job transfer

Adjustments, when granted, are based on the portion of the term a student was unable to attend. The date used to calculate the portion of tuition to be adjusted, for one of the above specified reasons, will

ceased attendir	ng classes on	a date which is	supported b	y the docum	entation (for exar	nple - the date of ho	ospitalization).	vithdrawal request w					
If a Week 3	pproved, the Week		1	vill be prora  Week 6	ted as follows, f Week 7	or a Part of Term Week 8	1 class (full terr	n class), and propo Week 10			other Parts of Week 12	f Term. Week 13	
77%	69%			54%	46%	38%	31%	23%		5%	8%	0%	
Note: M Mandatory Application The University	issing the term-base as within one tersity reserve	drop refund ed and manda calendar year ar wes the right to	deadline atory cou e to be sub o verify th	after initi rse-based mitted to the e authentic	al participation fees are not a Registrar's Office ity of any supp	on in a class is adjusted.  (U of R) only after orting document	not a basis to the class(es) are ation that has b		on adjust	ment.	entation.		
tudent Info			sity Error t	nat mignt req	uire a grade to be	removed; the App	ication for Graat	e Adjustment must b		Indicates re		ormation	
ast Name *			First N	ame *		Student ID * Term *							
										✓ Check only one			
udent's Prin	arv Facult	y or Academ	ic Unit *		Stu	Student's Campus or Federated College *				Winter (Jan-Apr) Year			
AR CE			IP S	$C \square SP$		U of R Luther College				S / S (May-Aug) Year			
BU CT ES KI NU SW SA					Car	Campion First Nations Univ of Canada				Fall (Sep-Dec) Year			
tudent Act	tion:						Re	gistrar's Offic	e Use C	nlv			
		copped before	this applic	ation is	✓ Automa	✓ Automated outcome based on the Academic Schedule and the				⚠ Adjusted outcome, if eligible, is based on University			
submitted to	omitted to the Registrar's Office.				student date of withdrawal in UR Self-Service/Banner.				policy and supporting documentation.				
CRN	Subject	Course	Section	Credit Hours	Status Code	Drop Effective DD-MMM-YY		Refund TUI FEE	Status Code	Adjustmer TUI FI	_	Effective Dat MMM-YYYY	
				110415	3,00			1 2 1 2 2 2					
udent Ap	plication	Reason / C	Class Pa	rticipati	on / Suppo	rting Docum	entation *		*	Indicates re	quired inf	ormation	
^		ason for you	^ _					_					
	lness or accid				us illness of family member		untary job tran Il to military du			tion error; tion required			
	-				•	ificate, obituary,	•	•	<b>(</b>	Yes N	No.		
•				-							10		
What was	your last o	late of class	activity,	course wo	rk submitted	or attendance	for this term?	* 🕣					
-			-					Authority Freedom o cation. If you have a			-		
						ction of Privacy, (30		eation. If you have a	ny questions	about the conc	ction, use, or	disclosure of thi	
	<b>(</b>									<b>(</b>			
D-MMM-YY	YYY *	Email Addre	ess *			D 4	.1 41 12			Student's	Signature	*	
EGISTRA	R'S OF	FICE USE	ONLY			Oo not write b	elow this line	e <u> </u>					
				grade remo	ved, W or other	r, must be approv	ed by the Facu	lty/Academic Uni	it on an A	GA form. A st	udent who s	submits an AT	
•	anation of u	•				ulty/academic un							
eason: Medical/Cor	mnassionata	Eligib			Eligible:	documentation		s and Notification assessment - On			oans/Schola	rships(SAFA)	
Involuntary j					Beyond one cal			ount reviewed	OII	Copy to st		iompo(OAIA)	
Student regis	•	<b>—</b>	time only	, <b></b>	revious one-tii	ne only	Exte	rnal Accounts (FS			to Registra	r	
						e/Student choice eriod (medical/c		ivables Superviso	r(FS)				
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