

Name _____ Empl ID: _____

Enter the semester for which reduction is requested: Semester _____ Enter the year: 20 _____

- Tuition liability reductions will only be considered for terms for which all courses were dropped or term withdrawn with all 'W' grades. Partial reductions will not be considered for only specific course(s) within a term.
- All decisions by the Tuition Liability Reduction Committee are final.
- The Committee's decision will be sent to the student's York College email account unless the student does not have a current York College email account then notification will be mailed by the U.S. Postal system.
- The Office of the Registrar does not review nor make decisions on Tuition Liability Reductions.
- Tuition liability reductions will not be considered for courses with earned grades of 'A+' through 'F', 'INC', 'P' and 'WU'
- An application for a reduction does not guarantee that a reduction will be approved.
- Reductions are granted in extreme cases and only when there are documented and compelling reasons to grant an exception to the College's policies and/or procedures.
- **Non-attendance, negligence of College policies, employment issues, financial constraints, software and hardware problems, unsatisfactory academic progress, lack of preparation and travel plans are not considered to be compelling reasons to grant an approval for reduction.**
- Timely submission of your application is a critical factor in the consideration for reduction. Applications must be submitted by June 30th of the academic year for the semester of the request.
- It is the student's responsibility to attach all required supporting documentation to this application. If required documentation is not submitted, the Tuition Liability Reduction Committee will deny the request.
- If the application is approved, the Committee may grant 25%, 50%, 75%, or 100% tuition liability reduction based upon supporting documentation submitted. No application is guaranteed an approval.
- The Refund Committee normally meets once a month during the months of October, November, December, March, April, May and June.
- The student is advised to make copies of all submitted documentation including this cover sheet and the application for his/her records.

By signing this application, you certify that you have read and understand all statements listed above.

Student Signature

Date

Staff Initial: _____

Registrar's Office Time Stamp

Date: _____

Photo ID Checked