



## REQUEST FOR TUITION ADJUSTMENT FORM

### STUDENT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Telephone Number:  Home  Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Semester You Are Appealing:

Fall 20 \_\_\_\_\_ Winter Intersession 20 \_\_\_\_\_ Spring 20 \_\_\_\_\_ Summer 20 \_\_\_\_\_

A request for Tuition Adjustment Form must be submitted to the VP of Enrollment Management and Student Development Office as soon as possible, but no later than one year after the incident. Only tuition, general service fees, and technology fees are refundable. Specific course fees and deposits are non-refundable. No appeal of Bookstore charges will be allowed.

You must submit an appeal in writing **including supporting documentation** to: VP of Enrollment Management and Student Development Office Tuition Adjustment Appeals Committee, Luzerne County Community College, 1333 South Prospect Street, Nanticoke, PA 18634 or by email to Registrars@luzerne.edu. If your request is submitted by e-mail you may submit your supporting documentation by fax to: (570)-740-0356. Please include your name and Student ID Number on

your faxed documentation. Please make copies for your records, the College will not return your documentation.

Please be aware that if Financial Aid has been paid to your account, you may owe funds to the College or may have to repay any financial aid you received.

*I declare the foregoing to be to the best of my knowledge and belief, an accurate statement of facts. It is understood that any false statement(s) may be sufficient reason for dismissal of my appeal.*

**SIGNATURE OF STUDENT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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*College Official Use only*

Committee Approved \_\_\_\_\_ Committee Denied \_\_\_\_\_ Date \_\_\_\_\_