Tuition Appeal Form

I. STUDENT INFORMATION  
(to be completed by student)

Full Name (first middle last)   OU PID Number   Phone
Mailing Address   City, State, Zip   OU E-mail Address

STATUS INFORMATION: Enter an "X" in the boxes below to indicate your study level, campus, college, and international student status.

Study Level:   undergraduate   graduate   not currently an Ohio University student

Campus:    
International Student:   Yes*   No   *If yes, you must check with International Student & Faculty Services before submitting an appeal.

COURSE INFORMATION  (courses for which tuition reimbursement is requested)

Academic Year   2020-2021  (Fall 20 - Summer 21)   2019-2020  (Fall 19 - Summer 20)   Other
Term   Fall Semester   Spring Semester   Summer 1   Summer 2   Full Summer   Other

Course Prefix & Number  (e.g. BIOL 1010)   Class Number  (e.g. 2659)   Section Number  (e.g. 100)   Credit Hours   Last Date Attended or Participated

Enter X below if NEVER attended / participated in class. Otherwise leave blank.

Enter an X below if this was an online or eCampus class. Otherwise leave blank.

Student Signature

II. STUDENT SERVICES INFORMATION  
(to be completed by college or regional campus dean's office personnel only)

Review Date   Reviewer Name   Reviewer e-mail address
Reason for Appeal:   Medical   Family Care   Never attended or enrolled elsewhere   Military   University Error   Job/Job Conflict   Death - family/other   Other

Comments:

STUDENT SERVICES STAFF: Attach change order, cancellation, or withdrawal form; copies of SIS registration screens; instructor verification of last day attended; and other documents as appropriate.

III. TUITION APPEALS PANEL REVIEW  
(to be completed by Appeals Panel only)

Review Panel Action:   Approved - Full Refund   Approved - partial refund   %   Denied - state reason in panel notes
Panel Notes:

Panel Chair Signature   Date

RETURN TO:  COPY TO:  

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