

Tuition Dispute Form

bursar@colorado.edu

University of Colorado at Boulder



Bursar's Office

Student Billing Department
43 UCB, Boulder, CO 80309-0043
Phone: (303) 492-5381
Fax: (303) 492-1017
<http://www.colorado.edu/bursar>

/ /
Month Day Year

Student ID Number

Last Name

First Name M.I.

Address _____ City _____ State _____ Zip _____

Email _____ Phone () _____

Fall Spring Summer

Year

I understand if my dispute is approved, I may be refunded the health insurance fee. This means that I will lose my health insurance coverage for the entire semester, unless I contact Wardenburg Health Center to make arrangements to repay the premium. _____ Signature of Student

Follow all instructions on the back of this form carefully to avoid delays in processing your request. Attach all required documentation, as well as a personal statement.

FOR COMMITTEE USE ONLY

Date Received: _____ Withdrawal/Drop Date: _____ Rebate Code: _____ F/A? _____ SDM? _____

Verified by: _____ Date: _____ Comments: _____

Committee Decision:

Anec _____ FA _____
Excel _____ FX-Stop _____
Letter _____ SDM _____
DW _____ Balance _____

Date: _____ By _____

Amount adjusted: _____



Tuition Dispute Form

To dispute tuition and mandatory fee charges, you must make a formal appeal to the Tuition Dispute Committee by the end of the semester in which charges were incurred (last day of finals). If you disagree with the charges and fail to avail yourself of the dispute process by the end of the semester, you will have been deemed to have waived your right to dispute the charges. A late request will be reviewed only if you can provide documentation that circumstances beyond your control prevented you from submitting your dispute form by the published deadline. The dispute committee reserves the right to deny your request.

Note: You must formally withdraw from the university, or drop your class, before you submit this form. Submitting the form with documentation does not guarantee a full or partial refund.

Instructions

- 1) Fill out the top half of the front of this form and write an explanation of your situation/request on a separate sheet of paper.
- 2) The Tuition Dispute Committee will review disputes related only to the following extenuating circumstances (listed with examples of required documentation):
 - Documented **university error**
A letter from appropriate university official/department citing university error must be attached to this form.
 - Documented **recent medical condition** (unanticipated medical situation that occurred during or immediately prior to the semester in question)
A dated letter from the attending physician (on letterhead stationery) containing the general nature of your illness/injury, dates, severity, and **your inability to attend school**.
 - Documented **immediate family emergency** (i.e., death, illness)
 1. Death certificate or obituary notice, **or**
 2. A dated letter from the attending physician (on letterhead stationery) containing the general nature of your family member's illness/injury, dates, and severity.
 - Documented **recent unanticipated financial problems** (unanticipated financial situation that occurred during or immediately prior to the semester in question)
Receipts of unexpected financial obligations or proof of change in income status, by you or the payer of your tuition bill.
 - Documented **verification of non-attendance** (does not qualify for refund of enrollment deposit)
 1. A letter from the individual professors (on university letterhead) stating that you never attended any classes, **or**
 2. If you transferred to another school - official enrollment verification (this must include an official seal and dates of the term attended) from that university.
- 3) Attach all required information to the form and return it to the Bursar's Office (see address on front).

All information submitted is confidential

Important Information

- The dispute process takes about **3 weeks**, if all required documentation is included.
- **Student Health Insurance: If your request is approved, you may be refunded the health insurance fee. This will result in no health insurance coverage for the entire semester. Please contact the Student Health Insurance Office at Wardenburg Health Center, (303) 492-5107, if you wish to remain insured or have questions.**
- **Financial Aid:** If you received financial aid for the semester, please contact the Office of Financial Aid, (303) 492-5091, to determine how withdrawing and disputing your account will affect your financial aid status.
- If your request is approved, **course fees** will not be refunded for classes dropped after the drop/add period.
- Colorado Residents: If your request is approved, you will be refunded only the student portion of the tuition (excluding the College Opportunity Fund credit.) The COF hours used **cannot** be restored to your lifetime hours balance.
- Submitting a dispute form does not exempt you from **late and service charges or financial stops**. We suggest you pay your bill in full.

You will be notified by e-mail or mail of the committee's decision, or its requirement for more information. If your request is approved, your tuition and fee account will be automatically adjusted. If you have any questions, call 303-492-5381 or e-mail Bursar@Colorado.edu.

