

WAUKESHA COUNTY TECHNICAL COLLEGE

Financial Accounting Service
800 Main Street, Pewaukee, WI 53072
262.691.5283 (Phone)
262.691.5087 (Fax)

Appeal for Tuition and/or Late Course Withdraw

Every student is responsible for charges and payments on their account. If a student feels charges on their account are invalid or in error, or if extenuating circumstances (situations outside of the student's control) prohibit the student from attending, the student may submit an appeal to be considered for a tuition refund and/or late course withdrawal. Please allow up to 45 days to research and process your appeal. You will receive an email and/or mailed letter response providing a determination.

INSTRUCTIONS: Please send completed form along with supporting documentation in-person or by mail to WCTC Billing Specialist, Enrollment Center Room C-019, WCTC, 800 Main Street, Pewaukee, WI 53072; or email to billing@wctc.edu; or submit by fax to 262.691.5087. Questions? Call 262.691.5283 or email billing@wctc.edu.

STUDENT INFORMATION (please print clearly)

Name	Student ID Number		
Mailing Address			
City	State	Zip Code	
Phone Number	Year and Semester		

Check the appropriate basis of your appeal and provide the appropriate documentation and detailed explanation.

- Serious illness of student or member of student's immediate family:** A signed statement from a physician or mental health professional on the provider's letterhead confirming the dates you were unable to attend and that withdrawal was due to medical issues. Excuse slips, discharge instructions, disability certificates, copies of invoices, appointment confirmations, etc. are not acceptable documentation.
- Death of an immediate family member:** Submit a death certificate, obituary, or death notice. Documents must clearly indicate the relationship of the deceased to the student.
- Military activation or deployment:** A copy of orders or call to duty is required.
- Significant change in course delivery:** Applies when WCTC has changed the class schedule or methods used to deliver instruction after the start of the course. Eligible only if student has contacted instructional personnel, navigator or advisor specific to academic program area. In the space below, outline steps followed.
- Other:** Provide a detailed explanation of the circumstances and attach documentation to support your request.

List the course(s) for which you are requesting an appeal:

Course Number	Course Name	Last Date of Attendance	What are you appealing? Check all that apply.
			<input type="checkbox"/> Tuition <input type="checkbox"/> Withdraw
			<input type="checkbox"/> Tuition <input type="checkbox"/> Withdraw
			<input type="checkbox"/> Tuition <input type="checkbox"/> Withdraw
			<input type="checkbox"/> Tuition <input type="checkbox"/> Withdraw
			<input type="checkbox"/> Tuition <input type="checkbox"/> Withdraw



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REASON FOR APPEAL (Use space below or attach additional paper.)
Describe the circumstances in detail and attach documentation to substantiate your request.

I certify that the information reported is correct. I understand that failure to supply truthful, adequate and complete information may result in a denial of this appeal with no further rights to appeal.

Signature _____

Date _____

