

I. Review the Following Information Prior to Completing the Form

- Tuition Refund Appeals Committee (TRAC) meetings are held on the third Thursday of each month. Appeals are reviewed in the order received. Appeals **must** be received no later than the first Thursday of the month to be reviewed at that month's meeting. You will receive written confirmation that your appeal form has been received. That confirmation will inform you of the date on which TRAC will review your appeal. Once TRAC has reached a determination, you will receive a letter or e-mail indicating TRAC's disposition of your appeal.
- Charges older than six (6) calendar years from today's date **cannot** be appealed.
- Late payment, room & board, and student health insurance charges **cannot** be reviewed by this committee. Contact the appropriate office regarding appeal procedures for these items.
- If you are filing an appeal that is based on the medical circumstances of either you or a family member, you **must** provide medical documentation issued by a physician or hospital. This documentation **must** include: 1) a brief summary of the illness; 2) a specific diagnosis; 3) a description of the impact that the medical condition had on the student's ability to attend class and/or perform class requirements *and* why it was medically necessary to discontinue studies as a result of medical circumstances; 4) the date that the physician made the recommendation to the student to discontinue studies; and 5) the actual date(s) of medical treatment(s) or service(s). The document **must** be printed on the physician's or hospital's official letterhead stationary and it must be signed. The Committee *will not* accept or consider copies of insurance forms, bills, explanation of benefits (EOB) forms, hospital records, or your physician's medical records.
- If your appeal is approved *and* you have received "I", "I/F", or "F" grades, you will need to approach each of your instructors to request that he or she process a "change of grade" on your behalf. Refunds or cancellation of charges **will not** be processed until the Registrar's Office confirms the grade change(s).
- TRAC decisions are based on the refund schedule established for the term. Consult the academic calendar for the appropriate term at <http://www.uc.edu/registrar/calendars.html>.
- **TRAC decisions are final.** An additional level of appeal **is not** available.

II. Complete All Items Below

Last Name: _____ First Name: _____

UCID: _____ E-mail Address: _____
(You will be notified by e-mail of the Committee's decision)

Current Mailing Address: _____
(Number and street)

City _____ State/Country _____ Zip _____

Term & Year You are Appealing: Autumn: _____ Winter: _____ Spring: _____ Summer: _____

III. Describe in detail the extenuating circumstances supporting your appeal. You may attach up to two (2) printed pages to this sheet.

IV. Signature

I hereby affirm that I understand and acknowledge the information provided at the top of this form. I also affirm that all of the details and documents I have submitted in support of my appeal are complete and accurate to the best of my knowledge.

Student's Signature: _____ Date: _____

V. Mail this form and ALL supporting documentation to:

University of Cincinnati
Tuition Refund Appeals Committee
c/o Office of the University Registrar
PO Box 210060
Cincinnati Ohio, 45221-0060