

# Appeal Cover Sheet for Reversal, Refund, and Waivers

Name of Student: \_\_\_\_\_ Student ID: \_\_\_\_\_

BMCC Staff Requesting: \_\_\_\_\_ Reason: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Term \_\_\_\_\_ of 20\_\_\_\_ Tuition Amt \$ \_\_\_\_\_  
 Fees Amt \$ \_\_\_\_\_  
 Late Fee Amt \$ \_\_\_\_\_  
**Business Office/Service Center:** **Total \$** \_\_\_\_\_

Date Appeal delivered to Business Office: \_\_\_\_\_ by: \_\_\_\_\_ (Svc Center initials)

Deadline to drop classes and get refund: \_\_\_\_\_ Withdraw Date: \_\_\_\_\_

Requesting:  Reversal  Refund/Waiver  Hold Removal

Details of Contact: (Contact Date, Email, mail, phone, etc.) \_\_\_\_\_

- AR Comments
- Student Mgmt Comments
- Instructors Comments
- Medical /Death in Family/Emergency documentation

Prior Appeals:  No  Yes, on \_\_\_\_\_; Result \_\_\_\_\_

I recommend:  Denying  Granting request because: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To Do Check-Off			
Initials	☑	Task Completed	Approved/Denied/Comments:
		Reverse Late Fee(s)	
		Refund or Waive Fee(s)	
		Remove Financial Holds (i.e. Library, bad address, other holds etc.)	
		Mail original/signed letter to Student (file copy in appeals notebook)	

**Reasons for Refund:**

- Special Circumstances
- IT/Tech error
- Admin error/Staff Request

*BMCC is an equal opportunity educator and employer.*

Admin Proc. BO-01-2004-0006 Rev. 08-11