



**Krieger School of Arts and Sciences & Whiting School of Engineering  
Tuition Refund Appeal Application**

**General Information**

Name _____	Hopkins ID Number _____	Email Address _____@jhu.edu	Phone Number _____
<input type="checkbox"/> Undergraduate Student	Major/Department _____	Course Number _____	Semester _____
<input type="checkbox"/> Graduate Student	Current Refund Granted _____%	Refund Requested _____%	

**Financial Aid/Veteran's Benefits:**

- I am receiving financial aid and have discussed with the Office of Student Financial Services the result of my decision to drop/withdraw and appeal my charges.
- I am receiving Veteran's benefits and have discussed with Veterans Services the result of my decision to drop/withdraw and appeal my charges.

**Circumstances that Support an Appeal**

*Below are examples of circumstances for which the Refund Appeal Committee will hear an appeal. Students must be **officially withdrawn from the class and/or classes** for which the appeal is being submitted. Additional information about class cancellation/drops can be found on the Registrar's website. You can view the tuition refund policy at <http://e-catalog.jhu.edu/undergrad-students/admissions-and-finance/#tuitiontext>. **There is a 180 day limit on filing a refund appeal.** Example: If a student is filing an appeal for the fall 2017 term then any appeal must be submitted within 180 calendar days of the last day of classes for the fall 2017 term.*

**Please check the box(es) to which your refund appeal applies**

- Significant illness or injury that required the student to withdraw from the class and/or classes.** This appeal application must include a letter from you including a brief summary of the illness; specific date(s) of medical treatment(s) and/or hospitalization; and letter from a licensed health professional (on letterhead) in support of your claim. Please DO NOT include detailed medical documentation such as current medications, x-rays, photos of an injury, or other documents related to your condition.
- Significant illness or injury of an immediate family member\* that required the student to withdraw from the class and/or classes.** The appeal application must include a letter from a licensed health professional listing the medical issues of the family member. Please DO NOT include detailed medical documentation such as current medications, x-rays, photos of an injury, or other documents related to your condition. For purposes of confirming the family relationship, the student may be required to provide reasonable documentation or statement of the family relationship.
- Death of an immediate family member\* that required the student to withdraw from the class and/or classes.** The appeal application must include documentation of death (e.g. death certificate, obituary). For purposes of confirming the family relationship, the student may be required to provide reasonable documentation or statement of the family relationship.
- Never Attended the Class(es).** The appeal must include verification of non-attendance from the instructors. The notification must be from the instructor of record for the class and must either a) come from the instructor's jhu.edu email address or b) be submitted and signed on the College's official letterhead.
- Other.** The University in its sole discretion may in limited circumstances hear an appeal that does not fall into one of the criteria above and that involve other extraordinary circumstances beyond your control (such as: fire or natural disaster occurred at your home). Please refer to the INSTRUCTIONS for more information. The nature of the issue giving rise to the request for the appeal must be clearly described in the student's Personal Statement (see below).

**Personal Statement**

The tuition refund appeal committee requires that all students submit a personal statement describing the situation and why they are requesting a refund of tuition. Please ATTACH this to the appeal, along with other required supporting documentation.

**Student Certification**

**By signing this form, you certify the information you provided is true. Misrepresentation of facts may be sufficient cause for automatic denial of this appeal and may be in violation of the Student Conduct Code. If you have read and understood all of the above statements, please sign and date the box below:**

Student signature _____	Date _____
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\* An immediate family member is a: mother, father, brother, sister, child, spouse, domestic partner, grandparent, grandchild, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law, sister-in-law, legal guardian, or other person who stands in place of a parent.

***This form does not apply to students in Advanced Academic Programs (AAP) or Engineering for Professionals (EP) programs.***