

# Durham Technical Community College

1637 Lawson Street  
Durham, NC 27703

## Continuing Education Department Occupational Healthcare Careers Course Request for Refund Fax: 919-686-3370

**To be completed only by the Student (except for cancellations)**

INSTRUCTIONS: Print clearly all of the information required to complete the form. Sign, date, and return the completed form to an official college representative.

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_ SSN \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Deleted from Blackboard \_\_\_\_\_

Course Title \_\_\_\_\_ Course Number \_\_\_\_\_ Begin Date \_\_\_\_\_

Reason for Withdrawal \_\_\_\_\_

I certify by signature my withdrawal from the above listed course and request a refund of registration fees paid as permitted by state regulations.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Accepting Staff Signature

\_\_\_\_\_  
Date/Time

### -For Office Use Only-

Contract Number \_\_\_\_\_ Initials \_\_\_\_\_

Request approved:

<input type="checkbox"/> Refund due (75%)	Account Codes	Amounts
<input type="checkbox"/> Refund due (100%)	_____	\$ _____
<input type="checkbox"/> Class cancelled	_____	\$ _____
<input type="checkbox"/> Transfer to another course	_____	\$ _____
<input type="checkbox"/> Other _____	_____	\$ _____

Disapproved:

<input type="checkbox"/> Past deadline	_____	\$ _____
<input type="checkbox"/> Other _____	NC Mutual _____	\$ _____

Signed: \_\_\_\_\_ Third party \_\_\_\_\_ \$ \_\_\_\_\_  
Registrar, Continuing Education

Date: \_\_\_\_\_ Total Amount \$ \_\_\_\_\_

Refund Policy: If a class is cancelled, a complete refund is issued automatically within 4 to 6 weeks. (1) A 100 percent refund of occupational extension registration fees is issued upon the request of the student if the student officially withdraws in writing from a class prior to the first class meeting. (2) A 75 percent refund of occupational extension registration fee is issued upon request of the student if the student officially withdraws and requests a refund prior to the 10 percent point in the class. For classes with 10 or fewer class meetings, refund requests must be submitted to the college no later than the first class meeting. No partial refunds are given for courses with one class meeting. No refund is issued after the 10 percent point of the class. (3) Student fees, including administrative, supplies, or insurance fees are not refunded unless the college cancels the class for which the fee is collected. Fees for specific instructional materials collected at registration are refunded unless the student receives the materials.