

SECTION 2: Eligibility Requirements (to be completed by student)

1. For which term are you petitioning for reversal of tuition charges?

- Spring Summer I Summer II Fall

2. Are you submitting a petition beyond the deadline for the term as listed below?

- YES  NO

Petition Term	Petition Deadline
Spring	June 15*
Summer I or II	September 1*
Fall	January 15*
* or the next business day if the deadline date falls on a weekend or holiday.	

If yes, STOP. You are not eligible for consideration of RTC.

3. Does your petition meet the eligibility requirements as listed below?

- YES NO 

(Check One)

- Military duty
- Death of immediate family member
- Institutional error
- Documented extraordinary event which prevented the student from completing the term.
- Illness or hospitalization of student or immediate family member (as defined in Section 1).

If no, STOP. You are not eligible for consideration of RTC.

4. Do you have supporting documentation for the petition as listed below?

- YES NO 

(Choose One)

- Military personnel ordered to activity duty; → Copy of Deployment Orders
- Death of student or immediate family member;* → Death Certificate/Notice or Obituary
- Verified Institutional Error; → As determined by the College
- Documented Extraordinary Event which prohibited the student from completing the term; → Supportive records
- Verifiable Leave of Absence for illness or hospitalization of student or immediate family member* → Signed, written statement on letterhead from primary physician indicating that circumstances prevented student from completing the term successfully (i.e. detailed excuse or return-to-work slip, appt. confirmation, diagnosis documents, etc.) Receipts/ invoices and explanation of benefits summaries will not be accepted.

*as defined in section 1

If no, STOP. You are not eligible for consideration of RTC.

5. Have you or should you have been withdrawn from the class(es) in question?

- YES NO 

If no, STOP. You are not eligible for consideration of RTC unless you have been withdrawn or dropped from the classes in question. Discuss alternatives with the instructor(s).

6. Did you receive Financial Aid (i.e. grants, scholarships, loans, Short Term Loan)?

- YES  NO

If yes, STOP. RTC may not be in your best interest. Discuss your circumstances with the Director of Financial Aid or the Designee at your campus and obtain their signature here:

FINANCIAL AID REPRESENTATIVE SIGNATURE

Note: If you are still enrolled in classes and you are receiving Financial Aid, discuss the implications of withdrawal on your financial aid package with the Financial Aid Office before withdrawing from one or more classes.

SECTION 3: Explanation of Petition (to be completed by student)

1. List the classes for which you are requesting reversal of tuition charges:

	CRN	Subject & Course # (i.e. Engl 101)	Last Date or Attendance		CRN	Subject & Course # (i.e. Engl 101)	Last Date or Attendance
1.				7.			
2.				8.			
3.				9.			
4.				10.			
5.				11.			
6.				12.			

2. Attach a brief explanation of the circumstances for which you are petitioning for reversal of tuition charges.

3. Attach supporting documentation.

SECTION 4: Acknowledgment (to be completed by student)

"If Financial Aid has been disbursed to my account, I have met with Financial Aid and understand the consequences of having tuition charges reversed."

INITIAL

STUDENT INITIALS

"By signing this form, I certify that I have dropped/withdrawn from all classes noted above and related to this request. All of the information provided, including my attached letter of explanation and supporting documentation is true and correct to the best of my knowledge. Finally, I acknowledge that petition review may take between two to four weeks and that decisions are final unless new evidence is provided, at which point I may appeal to have my petition re-considered."

SIGNATURE OF STUDENT

MM / DD / YY

TODAY'S DATE

Before submitting this petition, did you:

- complete section 1,
- complete section 2,
- complete section 3,
- attach your explanation of the circumstances which led you to petition,
- attach supporting documentation,
- initial, sign, and date section 4 above?

HACC ID:
LNAME, FNAME:
TERM CODE:

SECTION 5: RTC DECISION (to be completed by HACC representative accountable for RTC decision or administrative directive)

This section must be completed by the HACC representative accountable for the RTC decision that was made as a result of this petition and/or an administrative directive that calls for reversal of class tuition and fee charges or equal compensation. Administrative directives are the outcome of other administrative procedures or review processes that include but are not limited to Appeal of Academic Decisions or Student Grievances.

Date of Decision/Directive: MM / DD / YY HACC ID#: _____

Student's Name: LAST FIRST MI Phone #: () _____

Mailing Address: STREET/PO BOX APT CITY STATE ZIP

HACC Student Campus: Gettysburg Harrisburg (inc. Midtown & Virtual) Lancaster Lebanon York

Has the student petitioned for RTC in the past? YES NO UNKNOWN _____

Is/Are class(es) graded? YES NO UNKNOWN _____

Petition Decision: GRANT DENY ADMINISTRATIVE DIRECTIVE (not RTC Committee)

Decision conditions: (i.e. grant conditionally, willing to grant-graded, deny-need documentation, deny-financial aid, etc.)

Justification / Comments:

SIGNATURE OF RTC COMMITTEE MEMBER OR DESIGNEE
(IF ADMINISTRATIVE DIRECTIVE RESULTING FROM OTHER PROCEDURE, SIGNATURE OF PERSON MAKING DECISION OR STAFF PERSON IN RECEIPT OF DECISION)

MM / DD / YY
TODAY'S DATE

UPDATED: FEBRUARY 1, 2010