

Mail to:

Northern Oklahoma College 1220 E Grand

P.O. Box 310

Bursars@noc.edu

Tonkawa, OK 74653 **Email to:**

Petition for Extenuating Circumstances Refund

| Name:Studen | t ID#: | Date: |
|--|-------------------------|---|
| Street Address: | City: | Zip: |
| Petition Semester: Fall – Spring – Summer (circle one) | (year) Campus | :: Tonkawa – Enid – Stillwater - Other (circle one) |
| I received Financial Aid for the semester petitioning: yes | – no (circle one) | Telephone: |
| Students who withdraw from NOC must submit a "Withd have their award reduced or returned to the federal final | | - |
| Petition Deadline: 1 Year from the start of the semester | petitioning | |
| Refund eligibility criteria include: | | |
| Serious illness or injury verified by a doctor's weather psychologist) Death of a spouse, parent, in-law, grandparent Military duty assignment verified by a copy of Instructional Issues | t, or child verified by | a death certificate |
| Requests not meeting these requirements will not be cor Course Too Easy or Difficult, Financial Issues, Transportat | • | - |
| PROCEDURES: | | |
| 1) Supporting documentation is required before a petitio | on can be considered | |
| 2) Specific reason for your refund request (must meet eli | igibility requirements | s as stated above): |
| | | |
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| | | |
| If more space is need, please use the back of this form. | | |
| 3) Submit this form and all supporting documentation to | the NOC Bursar's Of | fice. (See address/email above) |
| 4) You will be notified in writing of the decision. | | |
| I certify the information on this form to be true, accurate | e, and complete. | |
| Signature: | | Date: |
| | VRITE BELOW THIS L | |
| Request is: Approved/Denied | | W/D Date: |
| Reason: | | |
| Vice President of Financial Affairs: | | Date: |