

**EAST TENNESSEE STATE UNIVERSITY**

**Request for Refund/Waiver**

**(After Dropping a Course, Late Registration Fee, or Withdrawal from the University)**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print) Last First MI

Student Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Phone #: \_\_\_\_\_

Student E Number: \_\_\_\_\_ Term: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

My request is due to:

Withdrawal from the university (list ALL courses) _____ _____ _____ _____ _____	Dropping the following course(s) (list course(s) dropped) _____ _____ _____ _____ _____	<input type="checkbox"/> Late Registration Fee
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Provide a detailed explanation for the basis of this request and attach any supporting documentation.  
List the last date of class attendance.

## Questions Regarding Your Request for Refund/Waiver? Check all that apply

- ARE YOU REQUESTING A REFUND/WAIVER OF YOUR TUITION AND FEES?**

Contact: [bursar@etsu.edu](mailto:bursar@etsu.edu) or 423-439-4212

- DO YOU CURRENTLY LIVE IN UNIVERSITY HOUSING?**

Contact: [housing@etsu.edu](mailto:housing@etsu.edu) or 423-439-4446

- DO YOU HAVE A MEAL PLAN?**

Contact: [housing@etsu.edu](mailto:housing@etsu.edu) or 423-439-4446

- ARE YOU CURRENTLY RECEIVING FEDERAL / STATE FINANCIAL AID, OR THE ACADEMIC PERFORMANCE SCHOLARSHIP?**

Contact: [finaid@etsu.edu](mailto:finaid@etsu.edu) or 423-439-4300

- HAVE YOU RECEIVED THE TENNESSEE LOTTERY SCHOLARSHIP IN A PRIOR TERM OR THE CURRENT TERM?**

Contact Teresa Williams, Chair of the TELS Institutional Review Panel at [williata@etsu.edu](mailto:williata@etsu.edu) or 423-439-6940

- ARE YOU CURRENTLY RECEIVING A GRADUATE ASSISTANTSHIP OR TUITION SCHOLARSHIP?**

Contact: Queen Brown at [brownq@etsu.edu](mailto:brownq@etsu.edu) or 423-439-4221

- DO YOU HAVE REMAINING FUNDS IN AN ID BUCS ACCOUNT?**

Contact: Amy Slaughter at [IDBUCS@etsu.edu](mailto:IDBUCS@etsu.edu) or 423-439-8316

**OFFICIAL DOCUMENTATION TO SUPPORT YOUR REQUEST MUST INCLUDE ONE OR MORE OF THE FOLLOWING:** (NOTE: Requests **without** official documentation will automatically be denied.)

- **Personal illness or injury** – must be documented by an official written statement by a licensed medical professional. (Example: Doctor, Nurse Practitioner, Psychiatrist/Psychologist) The document must also state that the student is eligible to return to school.
- **Military deployment** – must provide an official copy of your military orders or a statement signed by your commanding officer.
- **Death of an immediate family member** – must provide written information corroborating support of the request. (Immediate family members include Spouse, Child, Stepchild, Parent, Stepparent, Foster Parent, Parent-in-Law, Sibling, Grandparents, and Grandchildren).
- **Other Reason** – Must be supported by a statement from the student and appropriate written documentation.

**Retain a copy for yourself**

**And**

**Return completed form to:**

ETSU Bursar Financial Services

P.O. Box 70719

Johnson City, Tennessee 37614

Fax: 423-439-4650

To Review ETSU policies for refunds please visit:

[https://www.etsu.edu/bf/bursar/tuitioninfo/fee\\_adj\\_refund\\_policy.php](https://www.etsu.edu/bf/bursar/tuitioninfo/fee_adj_refund_policy.php)