

EAST LOS ANGELES COLLEGE
NONRESIDENT TUITION REFUND REQUEST

SUMMER FALL WINTER SPRING _____ YEAR STUDENT STATUS (Circle) 4 5 6

(Student complete Section 1 only. All other section are for office use.)

| | | | |
|--------------------------------------|--|----------------------------|---------------|
| Section 1 - Student | I herewith hand you _____ document(s) which will reduce my study program from a total of _____ units to a total of _____ units. Mail refund as per schedule to the following address. | | |
| | Last Name | First | Middle |
| | Street Address | City | State |
| | Telephone No. | Student's Signature | |
| Student I.D. No. 88- _____ | | | |
| Zip Code _____ | | | |

| | | |
|---------------------------|--|--------------|
| Section 2 - Office | DESCRIPTION | Units |
| | Total Units in Student's program prior to current change | _____ |
| | Net units eliminated by current change | _____ |
| | Total units in Student's program after current change | _____ |
| | Refund amount | \$ _____ |

| | |
|---------------------------|--|
| Section 3 - Office | <input type="checkbox"/> Entitled to full refund because of change from nonresident to resident status after payment of tuition. (Authority: Letter dated _____ from Interdistrict Relations Section of the Contractual Relations Branch.) |
| | <input type="checkbox"/> Entitled to full refund because class in which student enrolled was cancelled. |
| | <input type="checkbox"/> Entitled to full refund on net reduction in units resulting from student being "reclassified" from course carrying higher number of units to course carrying lower number of units. |
| | <input type="checkbox"/> Other (Describe fully noting document numbers, dates, etc.) _____ |

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| Section 4 - International Office |
| Refund Auth. By _____ |
| Date _____ |

| | |
|----------------------------------|------------------------|
| Section 5 - Fiscal Office | |
| Refund Check No. _____ | Amount _____ |
| Date _____ | No. Units _____ |