Northwest Technical College **Records Office**

By:

Northwest Technical College Records Office 05 Grant Avenue SE Semidji, MN 56601 Shone: 218-333-6600 fax: 218-333-6697 Secords@ntcmn.edu	REFUND/DROP/ WITHDRAWAL PETITION
Name:	Student ID:
Email Address:	Phone Number:
Step 1: Complete the following boxes to identify your petition type and your course information:	
Do you receive financial aid? Yes No	Do you receive Veteran Benefits? Yes No
I am petitioning for: Semester: Late Course Drop with Tuition & Fee Reversal/Refund Late Course Withdrawal(Instructor permission requ Course Exchange (skip Step 2, provide instructor support for course being added) Other:	
Step 2: Identify the reason for your petition.	
Check ALL that apply; attaching appropriate supporting documentation will strengthen your request; examples of types of documentation are included below. Extended illness of student. (e.g. health provider's statement written on official letterhead) Illness or death of immediate family member. (e.g. obituary or funeral information) Other	
Step 3 : By signing below I certify that my petition is truthful and complete. I understand the potential academic and financial implications of submitting this petition.	
Student Signature:	Date:
	Date:

Illness or death of immediate family men □ Other Step 3: By signing below I certify that my pet and financial implications of submitting this p Student Signature: _____ Step 4: Instructor Signature (if applicable) _____ PETITION RESULTS WILL BE E-MAILED TO THE E-MAIL ADDRESS PROVIDED ABOVE. ☐ **Approved** for ☐ Late drop with refund/reversal of charges ☐ Late withdrawal ☐ Denied ☐ Circumstances are not an approved basis for petition ☐ No Decision ☐ Additional information needed. See Comments below. **Comments:**