REQUEST FOR TUITION REFUND OR CREDIT

c/o BUSINESS OFFICE

Orange County Community College 115 South St., Middletown, NY 10940

Name		SS#	Semes	Semester Requested	
			Phone 3	Phone Number	
				ccepted. You must provid CC College Catalog, Refund	
_	ill be accepted unless the st e Records & Registration		ally" dropped the clas	s in question. Drop slips ar	
Ll	IST <u>ALL COURSES</u> YOU	ARE REQUES	TING A REFUND O	R CREDIT FOR:	
Course#	Course Name		# Credits	Non-credit	
	· -				
REASON FOR	R REQUEST				
Student Signatu	ıre		Date_		