A committee comprised of three University officials (the Registrar, the Bursar, and the Director of Admissions) meet once a month to hear and approve/disapprove limited exceptions to the published refund policy.

Under certain conditions, students may appeal the standard refund schedule for tuition and fees, based upon documented extraordinary circumstances. Students may also appeal for relief from the payment of a specific fee based upon documented extraordinary circumstances. It is expected that fees were paid when due. The appeals process is not to be used as a mechanism to avoid or delay fee payment.

Specific appeals will include:

Financial refunds for students dropping classes or completely withdrawing from the University for extraordinary circumstances documented in writing, such as:
1. Serious illness, injury or incident that could not have been influenced, predicted, planned for or prevented by the student or the Institution. Specifically excluded are conditions or chronic illness known to the student at the time of enrollment.

2. A demonstrable specific and substantial hardship which result from the normal application of the existing refund policy. Specifically excluded are circumstances or effects that are a simple inconvenience to the student or the student's family.

3. A documented instance where the student acted upon incorrect information given by a University official or publication concerning the refund policy and suffered a financial penalty as a result.

Students who believe they should be awarded a refund in excess of any to which they have already be entitled, should complete the attached APPLICATION FOR EXCEPTION TO REFUND POLICY form and return it to the Business Office at either campus. It will be submitted to the Refund Appeals Committee and applicants will be informed of the committee's decision. Students may appeal the decision of this committee to the Vice Chancellor for Student Development. Students may appeal the Vice Chancellor's decision to the Chancellor. The Chancellor's decision is final.
UNIVERSITY OF SOUTH CAROLINA BEAUFORT
APPLICATION FOR EXCEPTION TO REFUND POLICY

Name ________________________________   Student number _________________
Street Address __________________________________________
City _________________________  State __________  Zip _______________
Telephone Number ________________________  Cell Phone Number__________
Email address: ___________________________________________
Term __________  Date of Withdrawal ___________  Today’s Date _____________
Student Signature ___________________________________________

Reasons for Requesting Exception to Refund Policy:

Be sure to attach all documentation such as letters from doctors, hospital statements, copy of incorrect or misleading University publication, etc. to support your assertions.

Applicant for refund should obtain the following required signatures:

1. Business Office:  Does student have any outstanding debt to the University?
   
   Yes___________No___________ Signature ____________________________
   Printed name __________________________________________________________

2. Financial Aid Office:  Does student have financial aid which will be affected by a refund?
   
   Yes___________No___________ Signature ____________________________
   Printed name __________________________________________________________

3. Registrar’s Office:  Does student have any holds which will be affected by a refund?
   
   Yes___________No___________ Signature ____________________________
   Printed name __________________________________________________________

SUBMIT FORM TO BUSINESS OFFICE

Committee Action:
Approved _______ Disapproved _______ Refund Approved (% of Tuition/fees) __________
Date ____________  Signature ________________________________________________