

REQUEST FOR ADJUSTMENT

1. Student Information

Student Name:		Student Number:	
Program:			
Start date:		Withdrawal Date:	

2. Reason for Adjustment

Reason for Adjustment	
	Forfeit seat deposit
	Transfer tuition payment from internal account (HCAP, etc)
	Other, please specify

Authorization for adjustment:

Name:		Date:	
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4. Adjustment information:

Adjustment amount:	\$		
Cashier:		Date:	