



# STUDENT FINANCIAL PETITION

Use this form to request the reversal of a tuition charge. Golden Gate University (GGU) will only reverse a charge if you present evidence of a serious and unexpected circumstance beyond your control which prevented you from attending a course or paying its tuition. You must attach documentation verifying this circumstance, such as a letter from a physician with a license number. (Such letters need not provide any details beyond dates of treatment and expected recovery.) This documentation becomes the property of GGU and will not be returned. The petition and all of its information will remain confidential, and only be seen by members of the Committee on Student Financial Petitions, which is composed of representatives from the offices of Academic Affairs, Admissions & Student Affairs, Records & Registration, and Student Financial Services. If the committee needs to approach other members of the university to investigate or verify the claims made in the petition, it will first obtain your permission.

**The committee will consider your petition ONLY if you meet the following 4 conditions: 1) A petition letter is included; 2) You have dropped the course or received a “W”, a “NC” or a “F” grade with Last Date of Attendance (LDA) prior to the end date of the class (section); 3) Supporting documentation is sufficient and 4) We receive this petition within 60 calendar days of the last day of the class (section).**

Submit petition to:

Golden Gate University  
Committee on Student Financial Petitions  
Office of Student Accounting Services  
536 Mission St.  
San Francisco, CA 94105-2968

Email to: SAS@ggu.edu

Questions? Call the Committee Coordinator: (415) 442-6544

Class for which you want the tuition charge reversed: (ALL FEES ARE NON-REFUNDABLE)

Term (e.g. 19/FA): \_\_\_\_\_ Number (e.g. MGT 300): \_\_\_\_\_ Campus Location: \_\_\_\_\_

**Did you receive Federal Aid or Veterans Educational Benefits for the term(s) listed above?**  Yes  No

If you checked “Yes” above, please attach an email statement from that office indicating that you have reviewed with them any financial implication or further eligibility this may cause.

**I acknowledge that if this petition is approved and my tuition charge is reversed, and I received Federal Student Aid or Veterans Educational Benefits, I authorize the funds be used to reduce outstanding loans (to the Department of Education) or to pay a debt letter to the VA.** \_\_\_\_\_ (student signature)

GGU ID Number: \_\_\_\_\_  
Last name First Name

Email Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

Attach both:

- 1) A sheet on which you explain the extenuating circumstance (typed or legibly printed, and including only relevant details);
- 2) Verifying documentation.

The University will respond to all petitions in writing. You should allow a minimum of 10 working days to hear from the Committee after your submission. The decision of the committee is final and binding. Appeals will only be heard if they include information and/or documentation **not** included in the original petition.

If you have a documented disability (as defined by the Americans with Disabilities Act of 1990 and/or Section 504 of the Rehabilitation Act of 1973) contact GGU’s Disabilities Services Coordinator in the Office of Admissions & Student Affairs at (415) 442-7863. The coordinator will assist you in planning course accommodations in the future.

Your signature below indicates that you have read and understand the information on this form and confirm that your petition is true and accurate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**GGU USE ONLY:**  
 Approve  Deny Date: \_\_\_\_\_ Initials of committee members: \_\_\_\_\_