

PROCESS FOR FILING A PETITION FOR TUITION ADJUSTMENT

1. You must withdraw from the class. The Variance Committee will not review a petition until the student has withdrawn from class. **In order to be considered for a tuition variance, your request must be made within one year of withdrawal from the course.** To withdraw you must do the following:
 - ❖ Contact the College Office of the program in which you were enrolled and obtain a **Change in Registration or Change of Grade** form to drop your class.
2. Obtain a **Petition for Tuition Adjustment** form from the Student Accounting Office (SAO). This can be done in person, by phone (313) 993-1422 or via www.udmercy.edu. Type in "tuition adjustment: and click "go" in the search field. This will take you directly to the Petition for Tuition Adjustment form.
3. Be sure to include the following in your petition:
 - ❖ Student Name
 - ❖ Student Address, Phone Number and Student ID Number
 - ❖ Term and Year
 - ❖ Course or courses that you are seeking an adjustment in
4. Write a complete explanation of your request; **include all documentation that will support your petition.** Attach additional pages of paper if necessary. Examples of reasonable requests include: medical disability, unexpected employment changes or other situations beyond the control of the student.
5. Include all documentation from a third party with your request. Some examples may include:
 - ❖ A letter from your Doctor indicating the period you were not able to attend school.
 - ❖ A letter from your employer documenting the date the unexpected change occurred.
 - ❖ A recommendation from an official office of UDM is necessary for students whose reasons fall into the "*Other Situations beyond the Control of the Student.*"
6. Submit the **Petition for Tuition Adjustment** as follows:

Email the Petition for Tuition Adjustment form and supporting documents to:

Cheryl Styczynski @ styczycl@udmercy.edu

Or mail this form and supporting documents to:

**University of Detroit Mercy
Attn: Cheryl Styczynski, SAO Director
4001 West McNichols Road
Detroit, MI 48221-3038**

You may expect a response from the Variance Committee within 30 days from the date your information is received by the Student Accounting Office.



PETITION FOR TUITION ADJUSTMENT

PLEASE INCLUDE ALL DOCUMENTATION TO SUPPORT THIS REQUEST (INCLUDING 3RD PARTY DOCUMENTATION). FAILURE TO DO SO WILL RESULT IN YOUR PETITION BEING RETURNED TO YOU.

STUDENT NAME _____

STUDENT ADDRESS _____

STUDENT PHONE # _____

STUDENT ID # _____

TERM AND YEAR _____
FOR REQUEST

COURSE NAME (S) _____

REASON FOR REFUND REQUEST OR CHARGES TO BE DROPPED:

Signature of Student: _____ Date: _____

OPTIONAL COMMENTS BY COLLEGE OFFICE/ADVISOR:

Authorized Signature: _____ Date: _____