



UNIVERSITY OF CALIFORNIA, SANTA BARBARA EXTENSION

# Petition for Withdrawal from UCSB Extension Course and/or Request for Refund

Please see the UCSB Extension catalog from which you enrolled regarding the withdrawal from University Extension credit courses X1 to X199 and X300 to X499, and the refund policies associated with your class. Exceptions to these policies will be considered only under the most unusual circumstances. All exceptions must be submitted in writing and be accompanied by supporting documents (such as a doctor's note).

If you need to cancel your enrollment and are eligible for a refund, please notify us as soon as possible by fax at (805) 893-8427, by e-mail to [registrars@els.ucsb.edu](mailto:registrars@els.ucsb.edu), or drop by the Student Services Office at 1110 Kerr Hall, UCSB, Santa Barbara, CA 93106-1110.

A \$25 per course administrative fee is charged on all refunds except when courses are canceled, discontinued, or rescheduled.

➤ Name (first, m.i, last) \_\_\_\_\_ Social Security # or International I.D. \_\_\_\_\_

➤ Address \_\_\_\_\_ Phone \_\_\_\_\_

Course Title \_\_\_\_\_ Reg # \_\_\_\_\_

Course # \_\_\_\_\_ Instructor \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ # Course Meetings \_\_\_\_\_

Reason for Withdrawal/Cancellation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Instructor's Signature (X1 to X199 courses only) \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY:**

Full Refund     50% Refund     No Refund    Date Processed \_\_\_\_\_    Initials \_\_\_\_\_

Dean's Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE SUBMIT TO:**

**UCSB Extension** • 1110 Kerr Hall, UCSB, Santa Barbara CA 93106-1110  
Phone: (805) 893-4200 • E-mail: [registrars@els.ucsb.edu](mailto:registrars@els.ucsb.edu) • [www.extension.ucsb.edu](http://www.extension.ucsb.edu)