HUNTER
The City University of New York

Deletion Request

USE THIS FORM IF YOU ARE REQUESTING A DELETION OF UNDERGRADUATE-LEVEL COURSES, CHARGES AND FEES*

Please read carefully before completing form.

• Requests may require attendance verification or other documentation.

• Documentation from departments, employers, healthcare providers, etc. must be on official letterhead.

• "Last Date of Attendance" forms must be completed by the instructor and include a signature and a departmental stamp.

• A request is not considered complete until the form is completed and required documentation is received.

• Completed requests will be reviewed by a dean in the Dean of Students office. Please allow 5-10 business days for notification of decision. Incomplete requests or missing documentation will delay processing. Deletion of courses in which grades were posted requires additional time for processing.

• If you have had charges or fees dropped by this office in previous semesters, your request is **unlikely** to be approved.

• Course deletions may impact financial aid. You may be required to read and sign a "Financial Aid Withdrawal Information" form or discuss your request with a Financial Aid representative.

• Approval of your request will not necessarily result in removal of stops placed on your record. You are responsible for any other charges and fees you incur.

• If your request is approved, it will take 4-6 weeks for your account to be updated. Any questions regarding the status of your refund, **please contact the Bursar's office (238N).**

*Student Activity, Technology and Consolidated Services fees are non-refundable. Application fees of any kind are non-refundable regardless of whether a student chooses to attend the college or not.

After completing this form, please submit to Room 1119 East,
email petition@hunter.cuny.edu OR fax 212.650.3266.

HUNTER
The City University of New York

Deletion Request

Name: _____

CUNYFirst EMPL ID #: _____

Hunter E-mail: _____ @ myhunter.cuny.edu*

Telephone #: _____

Semester and year: _____

Deletion Request

☐ 25% ____ ☐ 50% ____ ☐ 75% ____ ☐ 100% ____ charge

☐ $18 C.O.P./schedule adjustment fee ____ ☐ $25 late reg. fee ____ ☐ Other _____

Courses

Course Code #	Department	Course #	Section #	Course Code #	Department	Course #	Section #

Reason for requesting deletion (attach documentation if any):

I have read and understood the information on the back of this form. ☐ **YES** ☐ **NO**

Signature: _____ Date: _____

For Office Use Only

Prior requests ☐*no* ☐*yes* _____ ***LDA*** ☐_____ ☐_____ ☐_____ ☐_____ ☐_____
Course *Course* *Course* *Course* *Course*

Additional documentation_____

BRQAWI_____ ***BDB*** ☐*no* ☐*yes* _____

☐***Approved***_____

_____

☐***Denied***_____

_____

After completing this form, please submit to Room 1119 East,
email petition@hunter.cuny.edu OR fax 212.650.3266.