

Appeal for Transfer/Refund for CEU/Non-Credit Course



SACRAMENTO STATE
COLLEGE OF CONTINUING EDUCATION

To appeal for a transfer or a refund, please complete and return this form to: College of Continuing Education, Information and Registration Services, 3000 State University Drive East, Sacramento, CA 95819-6103

Name (Last, First, Middle Initial) _____ Social Security Number _____

Daytime Phone _____

Original Course Title _____ Original Course Code _____

Dates _____ Fee _____

Transfer (to the course listed below) Transfer (course undecided) Refund: \$ _____

Course Title _____ Course Code _____

Dates _____ Fee _____

Course Title _____ Course Code _____

Dates _____ Fee _____

Course Title _____ Course Code _____

Dates _____ Fee _____

Reason for Appeal (attach extra paper if needed):

Signature _____ Date _____

Please offer any suggestions to help the College of Continuing Education improve our student services.
Attach extra paper if needed.

FOR OFFICE USE ONLY	
<input type="checkbox"/> Approved for Transfer	
<input type="checkbox"/> Approved for Refund \$ _____	
<input type="checkbox"/> Denied	
PDS Signature	Date