

Every student is responsible for charges and payments on their account. If a student feels charges on their account are invalid due to a billing error, he or she may dispute the charge for a class.

Students have 20 calendar days from the day tuition past due notices are sent to submit this form for the class(es)/charges in question to have any claims researched.

INSTRUCTIONS

All Dispute of Charges requests must be initiated by the student by submitting the completed Dispute of Charges Form with proper documentation to the Enrollment Center. Students may submit a dispute of charges within the term of enrollment for the disputed class(es) no later than 20 calendar days (postmarked) from the time tuition past due notices are sent. Once a student's past due balance is referred to an outside agency for collection and credit bureau reporting, they may no longer dispute their balance with Madison College and will be referred to the collection agency. A dispute of charges submitted after the term of enrollment or after an account has been referred to collections will result in denial. Any supporting documentation provided will become a part of the student record. **Phone calls, emails or other forms of communication of dispute will not be accepted.**

Failure to truthfully complete the necessary form in its entirety and/or supply adequate documentation will result in a denial of the refund by the Enrollment Center with no further rights to appeal.

Submit completed form and any supporting documentation in one of the following ways:

In-person (preferred): Enrollment Center - Truax Campus, Rm. A1000 or any regional or metro campus **Fax:** (608) 243-4353

Mail: Enrollment Center, Madison College, 1701 Wright Street, Madison, WI 53704

Please allow up to 60 days to research and process a Dispute of Charges request. Requests are reviewed in order they are received. You will receive a letter at the address provided regarding a determination. Please keep your contact information current through your Student Center.

Submitting a Dispute of Charges does not extend the tuition due date. Students are responsible for payment of fees owed by the deadline. Past due balances restrict course registration and must be paid in order to register for future classes while the Dispute is reviewed. If granted, a partial refund will be issued. Refunds will be made at Madison College's discretion and decisions are final.

EXCLUSIONS - The following are not grounds for a Dispute of Charges:

- Failure to drop a class for refund It is the responsibility of the student to withdraw from a course. To qualify for a full refund, the class must be dropped at least one full day prior to the class start date. For refund information, please refer to the WTCS Refund Policy.
- Non-attendance Failure to attend does not constitute an official withdrawal.
- **Situations that are Academic in Nature -** If the reason for dispute is related to coursework and/or instruction, please refer to **Conflict Management Services** for assistance.
- Extenuating Circumstance If an extenuating circumstance exists, please refer to that process and do not submit a Dispute of Charges.
- Failure to Receive an Invoice It is the student's responsibility to keep their contact information current
 in their myMadisonCollege Student Center. Invoices, class schedules and refund policies are sent via
 mail to the address on file in the Student Center and via e-mail to the student's Madison College email
 account. Account charges and class schedules are posted to the student's myMadisonCollege
 Student Center account.

Questions? For further assistance with this form, call the Enrollment Center at (608) 246-6210 or visit in-person.

INSTRUCTIONS - Please send completed form along with supporting documentation in-person or by mail to the Madison College Enrollment Center, 1701 Wright Street, Madison, WI 53704; or submit by fax to (608) 243-4353.

STUDENT INFO	PRMATION				
Name: Last Tolly		First Lucas			Middle Initial B
Student ID (required) 2853197			Email	Itolly@madisoncollege.edu	
Address 233 Cedar Dr City		City Oregon	State WI	Zip Code <u>53575</u> Ph	one 6085203274
CLASS & TERM INFORMATION					
Academic Year 2017 Term Fall Spring/Interim Summer					
Did you receive financial aid for the identified term? Yes No					
Did you receive veterans benefits for the identified term? Yes No					
Classes in dispute:					
Class Number (5 digits)	Class Title	Meeting Days/Times	Last Date of Attendance	Date Dropped / Confirm	Did you notify the instructor?
61442	Systems Design	Monday 5:30PM - 9:20PM	Alleridarioe	1/24/2016	Yes No
					Yes No
					Yes No
					Yes No
					Yes No
Did you discuss your situation with college instructors, advisors or staff? Yes No If yes, please describe. If no, indicate why:					
REASON FOR DISPUTE - Please indicate why the charges are invalid (attach addition documentation if necessary):					
The class in question, Systems Design, is a renamed version of a previous class I have already taken and passed, Object Oriented Design w/ UML. I was given zero indication that this class was the same as a previous I had taken, nor was I prevented from taking it again. I only found out after a friend told me right before class, and then confirming with the teacher via email. The reason I signed up for it was because, upon signing up for classes in the fall semester last year, I saw an unfamiliar class on my program's (IT-Web Software Developer) Curriculum. I then assumed it was something I needed to take.					
Results you are seeking:					
I feel that, because there was no clear indication that this was a class I had previously taken, I should not be penalized 20% of the cost for attending the first day only to find it I had already taken the class. Currently, only 80% of the charge of the class has been taken off. I would like to be given a full refund.					
I understand that failure to supply truthful, adequate and complete information on this application or supporting documentation will result in a denial of the request with no further rights to appeal.					
Student Signature Date					
Or: Power of Attorney Signature*			Date		
Power of Attorney Name *Requests from a power of attorney require legal docume of possession of power of attorney at the time request is s					
Truax, Regional & Metro Campus Staff Only- Date stamp, initial and email to intake@madisoncollege.edu.					
Date Received Staff Initials					