

# Non-Credit Add/Drop/Refund Form

Date: \_\_\_\_\_ Student ID Number: @ \_\_\_\_\_

Student's Name: \_\_\_\_\_  

Last
First
Middle

Student's Address \_\_\_\_\_  

Street
City, State
Zip

Student's Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Semester (Circle One): \_\_\_\_\_  

Month/Day/Year
Fall
Winter
Spring
Summer

Please complete form and mail or fax to:  
  
 Fashion Institute of Technology  
 School of Continuing and Professional Studies  
 227 West 27th Street, Room D-130  
 New York City 10001-5992  
 Fax: (212) 217-7176

**PRECOLLEGE PROGRAMS/ COURSES**  
 Refund Policy Schedule:  
 FIT cancelled course: 100%  
 Withdrawal prior to last day of registration: 100%  
 Withdrawal prior to first scheduled class: 75%  
 Withdrawal prior to second scheduled class: 50%  
 Withdrawal thereafter: no refund

**ADULT NON-CREDIT PROGRAMS/ COURSES**  
 Refund Policy Schedule:  
 Requests for withdrawal/refund of tuition must be made in writing and be received by D-130 24business hours prior to the start of program for full refund. Requests received after a course's completion cannot be fulfilled. The policy for partial refund is in accordance with the following schedule:  
  
Courses with 2 sessions:  
 25% after first session  
  
Courses with 3 sessions:  
 50% after first session, no refund after second session  
  
Courses with 4 sessions:  
 50% after first session, 25% after second session, no refund after third session  
  
Courses with 5+ sessions:  
 75% after first session, 50% after second session, 25% after third session, no refund after fourth session

**CHANGE: DROP**

CRN	COURSE	SECTION	TIME
<i>EXAMPLE:</i> 2059	HPH 159 or SXF200	A	9:30am - 12:30pm

**CHANGE: ADD**

CRN	COURSE	SECTION	TIME
<i>EXAMPLE:</i> 2059	HPH 159 or SXF200	A	9:30am - 12:30pm

**NOTE:** If the cost of the course(s) you are adding is greater than the cost of the course(s) you are dropping, please submit payment immediately for the additional amount. If the course is less, we will issue a refund for the difference.

**WITHDRAWAL/REFUND**

CRN	COURSE	SECTION	TIME
<i>EXAMPLE:</i> 2059	HPH 159 or SXF200	A	9:30am - 12:30pm

How did you pay? \_\_\_ Did not pay \_\_\_ Check \_\_\_ Money Order \_\_\_ Visa \_\_\_ MasterCard \_\_\_ American Express \_\_\_ Discover

Last four digits of credit card used: \_\_\_\_\_ Card Expiration Date: \_\_\_\_\_

**NOTE:** The registration fee is not refundable. Refunds are calculated from the date we receive the form. Withdrawals cannot be processed by phone. Guest speaker changes are not accepted as a reason for refund requests. Refund processing generally takes four to six weeks.

Authorized Signature \_\_\_\_\_