

## NON-RESIDENT STATEMENT AND REFUND SCHEDULE

Admissions Center 900 Otay Lakes Road Chula Vista, CA 91910 (619) 482-6550 (619) 482-6489 (fax)

(Please Print)		
Last Name	First Name	M.I.
Student I.D. No.	Date of Birth	
This statement is to confirm that I am awa College for the following semester/ session	_	
SPRING	SUMMER FAI	LL 200
<u>NOTE</u> : Classification as a "Non-resident California, but rather, that the student has classification.		
If you wish to appeal this decision, please next three days.	contact the Residency Clerk in	the Admissions Center within the
Non-Resident Tuition Fees		
The non-resident tuition fees must be paid paid at this time. There is no provision for tuition fee for the FALL SPRING SUM	r deferment of payment or time p	payments. The non-resident
Non-Resident Tuition Refunds		
To qualify for a refund of tuition fees, you deadline. Please refer to the class schedule	<u> </u>	the class(es) by the refund
• Refunds will be mailed four weeks after	er the withdrawal deadline.	
• If you do not receive your refund, plead of the semester.	se contact the Accounts/Cashier'	s Office during the eighth week
I have read and understand the above state above, please obtain additional clarification	•	•
Signature	Dat	re