

**University of Rochester**  
**University Council on Graduate Studies, 259 Wallis Hall**

**FORM FOR REFUND OF GRADUATE REGISTRATION AND HEALTH FEES IN FINAL SEMESTER**

(995 Continuation of Doctoral Enrollment & 999 or 998 Doctoral Dissertation)  
(895 Continuation of Master's Enrollment & 899 or 898 Master's Dissertation)

This form must be submitted before the end of the relevant semester/quarter. The amount of refund is based on the date of submission (upload) of the final dissertation and completion of all degree requirements.

The refund schedule for the **registration fee** is as follows:

- 100% during the first 2 weeks of the semester or first week of the quarter
- 75% during weeks 3-5 of the semester or weeks 2-3 of the quarter
- 50% during weeks 6-8 of the semester or weeks 4-5 of the quarter
- 25% during weeks 9-11 of the semester or week 6-7 of the quarter
- 0% during the remainder of the semester or quarter

The refund schedule for the **health fee\*** is as follows:

- 100% during the first 2 weeks of the semester or first week of the quarter  
*[student is not eligible for UR health coverage if registration 100% refunded]*
- 0% during the remainder of the semester or quarter  
*[health benefits remain in place until current coverage ends in July or December]*

\*Consult a health benefits advisor at [insurance@uhs.rochester.edu](mailto:insurance@uhs.rochester.edu) with any questions.

\*\*\*\*\*

STUDENT NAME _____	UR ID# _____
ADDRESS _____ Number and street name	_____ City/State/ZIP
PHONE: _____	EMAIL: _____

The final corrected copy of the dissertation was submitted/uploaded on: \_\_\_\_\_  
Month/Day/Year

I understand that by receiving a refund of the registration fee, I am terminating my enrollment as a student, which may have implications for loan deferments. I understand it is my responsibility to check with my loan agencies regarding how termination of my student status might affect my loan deferments.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\*\*\*\*\*Office Use Only\*\*\*\*\*

Amount of <b>registration fee</b> to be refunded (check):	100%	75%	50%	25%
Amount of <b>health fee</b> to be refunded (check):	100%	0%		

\_\_\_\_\_  
Associate Dean of Graduate Studies  
(for Master's, DNP, EdD, DMA students)

\_\_\_\_\_  
Administrator, University Graduate Studies  
(for PhD students)

**Distribution:**

Original to Bursar's Office  
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