

FEE APPEAL

ALL REQUESTS FOR REFUNDS AND OTHER FEE APPEAL ACTIONS MUST BE SUBMITTED NOT LATER THAN SIX (6) MONTHS AFTER THE END OF THE SEMESTER TO WHICH IT APPLIES. SUPPORTING DOCUMENTATION SHOULD BE ATTACHED.

Semester (circle one) F Sp Su Yr _____

UWF I.D. Number: _____

PRINT NAME AND MAILING ADDRESS:

*Are you on financial aid? Yes No

Fees paid by credit card? Yes No

Daytime Phone: _____

E-mail Address: _____

Check the applicable block(s) which apply to your appeal, attaching *required documentation (noted in parentheses)*:

Late Payment Fee (registration form and/or late fee payment)

Withdrawal with refund from a course or all courses due to:

- University action beyond student's control
- Medical (must be supported by signed statement from attending physician on official letterhead)
- Death (must be supported by copy of death certificate or obituary notice)
- Military duty (must be supported by copy of official orders)
- Transferred to another city/state by employer (must be supported by letter on company letterhead)
- Other (specify) _____

*Financial Aid / VA Benefits

- I am receiving financial aid and have discussed the effect of the actions listed with the OSFA.
- I am receiving VA benefits and have discussed the actions listed with Veterans Services.

Fill in the reference number, course prefix & number, and credit hour for each course affected by this appeal:

Ref #	Course Prefix/No.	Hrs	Ref #	Course Prefix/No.	Hrs	Ref #	Course Prefix/No.	Hrs

Use this space to provide information regarding your appeal (e.g., justification), attaching additional pages as needed.:

Student Signature _____

Date _____

Approved **TRs posted** **Disapproved**

Notified: **Registrar's Office** **Student**

Processed by: _____ Date _____

Comments:
