



FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY

REGISTRAR'S OFFICE

1735 Wahnish Way, CASS Bldg., Suite #206
Tallahassee, FL 32307

Office: (850) 599-3115 Fax: (850) 561-2428 Email: registrardocs@famu.edu

REQUEST TO WAIVE
LATE PAYMENT OR LATE REGISTRATION FEE

Note: A separate form must be completed if both fees are requested for waiver.

WAIVER REQUEST FOR: [ ] LATE PAYMENT [ ] LATE REGISTRATION
Return to Return to
Student Financial Services Office - FHAC G-7 Registrar's Office - FHAC 112
Student ID Number

PRINT FULL NAME: (LAST), (FIRST), (MIDDLE), (MAIDEN)

STUDENT ADDRESS: Street Address, Apt. #, City, State, Zip Code, Phone: ( ) -

CURRENT FAMU
EMAIL ADDRESS:

TERM (Check One): [ ] FALL [ ] SPRING [ ] SUMMER YEAR: \_\_\_\_\_

PLEASE ANSWER THE FOLLOWING QUESTIONS BELOW BEFORE COMPLETING THIS REQUEST:

- A. WERE YOU ASSESSED THE LATE FEE DUE TO A PROBLEM WITH FINANCIAL AID? IF YES, ATTACH A LETTER FROM THE OFFICE OF FINANCIAL AID AND EXPLAIN BELOW. [ ] YES [ ] NO
B. WERE YOU ASSESSED THE LATE FEE DUE TO A UNIVERSITY ERROR? IF YES, ATTACH A LETTER FROM THE DEPARTMENT THAT MADE THE ERROR AND EXPLAIN BELOW. [ ] YES [ ] NO
C. WERE YOU ASSESSED THE LATE FEE DUE TO EXTRAORDINARY CIRCUMSTANCES SUCH AS ILLNESS OR DEATH IN THE FAMILY? IF YES, ATTACH ANY SUPPORTING DOCUMENTATION, SUCH AS A DOCTOR'S NOTE, OBITUARY, OR COPY OF DEATH CERTIFICATE AND EXPLAIN BELOW. [ ] YES [ ] NO

PLEASE NOTE: LACK OF FUNDS IS NOT A VALID REASON TO WAIVE A LATE FEE. IT IS THE RESPONSIBILITY OF THE STUDENT, NOT THE ACADEMIC DEPARTMENT TO REGISTER BEFORE THE LATE FEE IS ASSESSED.

EXPLANATION: \_\_\_\_\_

STUDENT'S SIGNATURE

DATE

REQUEST: APPROVED [ ] DENIED [ ]

COMMENTS OR REASON(S) DENIED: \_\_\_\_\_

SUPERVISOR'S SIGNATURE

DATE

>>FOR LATE PAYMENT FEE APPEALS ONLY<<

DATE OF APPEAL: \_\_\_\_\_ APPROVED [ ] DENIED [ ]