

FEE APPEALS COMMITTEE PETITION

(Petitions must be submitted within six months after the term the late fee is charged in order to be considered.)

TYPE ALL INFORMATION

(Petitions that are not typed will be rejected automatically)

NAME:	UCFID: _		PETITION TERM:
KNIGHTS EMAIL:	PHONE NO:		
Please answer this question with YES or NO before com	pleting this request	:	
Were you assessed the late fee due to a university explaining the error. For any reasons other than university departmental err	_		-
ACTION: Please check which is applicable.			
Waive Late Payment Fee	Waive Late I	Registration Fee	
Waive Dropped For Non-Payment Fee (DNP)	Waive Reinstatement Fees (Late Payment DNP / Late Registration)		
This is a re-appeal because my petition was previously	y denied.		

DASIS FOR REQUI	LS 1. (Limit response to	me space provided be	10W.)
Student Certification: I understand that I will receive the c	ommittee's decision	via email to my I	Knights email address.
STUDENT'S SIGNATURE			DATE
**************************************	**************************************	************** Denied	************
Comments:			
RETURN TO: UCF Student Account Services			
P.O. Box 160115, Orlando FL. 32816-0115 Email: studentaccounts@ucf.edu			
FAX: 407-823-5127	DA	A1E:	