Appeal to Reinstate Schedule Cancelled for Nonpayment of Tuition

Revised 3/7/2014

Step 1: Please answer the following questions before completing this petition:

Was your schedule cancelled due to a problem with financial aid? If yes, attach a letter from the Office of Financial Aid and explain.

Was your schedule cancelled due to a University error in posting a waiver or a third party billing? If yes, attach a letter from the department which made the error and explain.

Was your schedule cancelled due to extraordinary circumstances, such as illness or death in the family? If yes, attach any relevant supporting documentation, such as a doctor’s note, obituary, or a copy of a death certificate and explain below.

Has your schedule been cancelled previously? If yes, list all semesters and years below.

If you answered ‘yes’ to any of the questions above, please include an explanation below.

Appeals may only be considered for the current term. Retroactive appeals will not be considered.

PLEASE NOTE: A late payment fee and late registration fee totaling $200.00 will be added to your account. Payments on all financial obligations to the University are applied on the basis of age of the debt. Current tuition plus late fees and any past due tuition must be paid in full prior to reinstatement. For liability reasons, students should not attend classes until their schedule has been reinstated. You may not appeal for a schedule reinstatement more than two times in your academic career. Additional appeals will be denied automatically.

Step 2: Once completed take the appeal form to Student Financial Services. You will be expected to make a complete payment or payment arrangement for the outstanding tuition and fees.

Step 3: Return signed appeal form with a copy of your payment screen showing a zero balance to the Office of the University Registrar, to have your schedule reinstated no later than the end of the 7th week of classes as designated by the academic calendar. Payments returned for insufficient funds will negate your reinstatement.

Student’s Signature ____________________________ Date ____________________________