Late Registration Fee Waiver Request

The University of South Florida will approve a waiver of the Late Registration Fee if a student registers late due to circumstances determined by the University to be exceptional and beyond the control of the student. In order to be considered for a late registration waiver, one of the conditions listed on this form must be met and documented. Submit completed forms and documentation to the Office of the Registrar or the records and registration location on your campus.

NOTE: BOG Regulation 7.002 states: A written appeal for a refund or other appeal action must be submitted to the University within six months of the close of the term to which the refund of other appeal action is applicable.

NAME ___________________________________________ USFID Number ________________________________

Address ___________________________________________ Phone ________________________________

City, State & ZIP _______________________________ USF Email ________________________________

COMPLETE ITEMS:

Check the condition(s) which apply to this request, along with supporting documentation.

____ Illness of the student of such severity or duration to preclude completion of the course(s) as confirmed in writing by a physician (M.D).

____ Death of the student or death in the immediate family (parent, step-parent, grandparent, spouse, child or sibling) as confirmed by documentation (i.e. death certificate, obituary) indicating the student's relationship to the deceased.

____ Involuntary call to active military duty as confirmed by military orders.

____ A situation in which the University is in error as confirmed by an appropriate University official.

____ Other documented exceptional circumstances beyond the control of the student which precluded completion of the course(s) accompanied by explanatory letter and supporting documentation.

Date Registration Initiated ____________________________ Term of Registration ___________________________

PLEASE NOTE: This process can take up to 30 days from the date of submission. You will be notified of the decision via USF email. You will be notified of the committee’s decision at your USF email address.

Student Signature ___________________________________________ Date ___________________________

FOR OFFICE USE ONLY

☐ Approval

☐ Denied

Reason for Denial: