

FEE WAIVER APPEAL

Student Accounts Receivable
 University of Minnesota, Duluth
 140 Darland Administration Building
 1049 University Drive
 Duluth, MN 55812
 Telephone: 218-726-7190
 Fax: 218-726-8607

DIRECTIONS

Additional fees will be charged to your University student account if you make payments after the due date, or your installment plan payment is less than the minimum amount due. To appeal these charges, please complete all sections of this form. In SECTION B, briefly describe your reason for submitting this request to have your fee waived. Please be sure to sign SECTION C before you mail, fax, or bring the form to the Student Accounts Receivable Office at the address in the upper right corner.

To complete online, place your cursor in a field and type. Print a copy to add your signature.

SECTION A. Student information		
Name (last, first, middle initial)	Student ID number	Phone number (include area code)
Current address (street address, apartment number or P.O. Box, city, state, Zip Code)		
College or program	Amount appealed	Term and year fee was assessed
Fee type (Please check one.) <input type="checkbox"/> late payment fee <input type="checkbox"/> installment plan fee		
SECTION B. Reason for appeal		
Please state your reason for requesting a fee waiver. You may continue on the reverse side of this form, if necessary.		
SECTION C. Certification		
You must sign this form certifying that the information you provided is true.		
Signature		Date

for office use only

late payment fee 800340000010	installment fee 800340000022	action taken <input type="checkbox"/> approved <input type="checkbox"/> denied	comments
one stop counselor's signature		date	



To request copies of this form in an alternative format, please call the Disabilities Services liaison at 218-726-8532. The University of Minnesota is an equal opportunity employer and educator.

SECTION B. Reason for appeal

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