STUDENT ACCOUNT APPEALS FORM

Disclaimer: Due to the volume of appeals, please note it can take up to four weeks for a decision to be rendered on appeals. Also, it is at the discretion of the Bursar to approve/deny appeals. If a balance is owed, you still are responsible for paying the amount owed until a decision is rendered. If the decision is favorable to you, you will be refunded any amounts paid, as applicable. Please note a retroactive withdrawal does not automatically approve you for a student account appeal.

Date: _______________  Student ID: ___________

Print Name: _____________________  Signature: _____________________

E-mail address: ___________________  Phone Number: ___________________

Semester(s) Outstanding Debt Owed: ____________________________________

Reason for Appeal (Please attach any additional pertinent information):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

For Office Use Only:

Date Received: ___________________  Date Reviewed: ___________________

Request Approved: ☐  Request Denied: ☐

Comment: ____________________________