# University of Minnesota Duluth

# **Late Registration Fee Appeal**

## **Directions**

You may submit an appeal to waive payment of a late registration fee charged to your University student account when you registered on the first day of the term or later. For consideration, you must submit a completed form, along with a written statement on University letterhead, that is signed by a University staff or faculty member to verify his or her role in your late registration.

Complete this form in Adobe Reader software, not a Web browser, to ensure the privacy of your information. Place the cursor in a field and type. Print a copy to add the required signature(s) in blue or black ink.

#### **Return this form on campus to:**

One Stop Student Services 23 Solon Campus Center

### or mail it to:

Office of Financial Aid and Registrar University of Minnesota Duluth 1049 University Drive Duluth MN 55812-3011

E-mail: umdhelp@d.umn.edu Phone: 218-726-8000

Student information				
Student last name		First	Middle	
Current street address	City		State	Zip Code
Current street address	City		State	Zip Code
Student ID number	U of M E-mail		Phone (include area code)	
		@d.umn.edu		
Term and year fee was assessed			College (e.g., CLA, SCSE)	
☐ Fall semester ☐ Spring se	emester $\ \square$ May session $\ \square$ Summer sessio	n Year 20		
Your reason for appeal-attach additional pages if necessary. (Remember, also, to attach a statement, on University letterhead, signed by a University staff or faculty member verifying thier role in your late registration.)				
Student certification				
My signature below certifies that the information I have provided on this form is true and accurate to the best of my knowledge.				
lwy signature below certifies that the	e information i have provided on this form is true and	accurate to the best t	Date Date	
Student signature				
Office use only				
Authorized signature			Date	
☐ Approved ☐ Denied Con	nments:			
			Effective date	
			By Date _	