

Late Fee Appeal Form

This appeal is intended for students who experienced unforeseen extenuating circumstances that affected their ability to make payment on the tuition fee due date. Be advised information regarding fee deadlines is accessible to students in a variety of mediums: fee schedules, registration handbooks, UWO email reminders, and web postings. Additionally, the Student Accounts Office is available to assist students with any financial concerns. Therefore, failure to meet payment deadlines will result in a late penalty fee. This penalty can be assessed once per term and will become part of the outstanding balance on the student's account.

Student Information

Name:	Student Number:
Address:	UWO Email:
Term: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Summer	My tuition is paid in full: Yes <input type="checkbox"/> No <input type="checkbox"/> Note: If you have an overdue balance your appeal will be denied.

Reason for Appeal (Check One):

- ☐ OSAP/Government funding delay (attach proof). ☐ University error (explain and attach proof).
- ☐ Family emergency (attach supporting documentation). ☐ Medical emergency (attach doctor's note).
- ☐ Other (explain in the section below). Note: Financial hardship will not be considered.

Explanation of Appeal (Attach Additional Pages if Needed):

[illegible]

Supporting Documentation Attached: Yes ☐ No ☐

Note: Please attach any documentation supporting your explanation for late payment (e.g., death certificate, medical notes, third-party letter, etc.).

Student Acknowledgment

I certify that the information provided is accurate and complete; I authorize the *Student Accounts Office* to seek additional verification or information as needed. I also understand that this appeal may result in approval or denial. I will be notified of the committee's decision via UWO email. I understand that submission of this form does not guarantee a fee reversal. If my appeal is denied, I am responsible for paying the outstanding balance.

Signature: _____ **Date:** _____