

Late Payment Fee Waiver Request Form

Florida Polytechnic University will approve a waiver of the Late Payment Fee if the student was unable to make a payment on time due to exceptional circumstances beyond their control. In order to be considered for a late payment fee waiver, one of the conditions listed on this form must be met and documented. Submit completed forms and documentation to Student Business Services.

NOTE: Failure to timely pay tuition and fees or make appropriate arrangements for payment will result in cancellation of the student's schedule. A student who makes an effort to pay tuition and fees by credit card, check, financial aid, scholarships, grants, waivers, third party contracts, Florida Bright Futures, and/or Florida Prepaid by the published tuition payment deadline will not be cancelled from their courses.

Student ID: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Please complete Items A-D:

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

1. A death in the student's immediate family (parent, spouse, child, sibling, or grandparent) that precluded timely payment of tuition and fees, as confirmed by documentation indicating the student's relationship to the deceased.
2. Student's active military duty or return from active duty that precluded timely payment of tuition and fees which is confirmed by military orders
3. University error which precluded the student's timely payment of tuition and fees, as confirmed in writing on University letterhead signed by an appropriate University official or by appropriate official University documents
4. Other documented exceptional circumstances (whether the circumstances are indeed "exceptional" will be determined by Student Business Services) beyond the student's control that precluded timely payment of tuition and fees, accompanied by a letter of explanation and appropriate documentation.

B. Sign and submit this form with your detailed explanation and documentation to Student Business Services.

Student Signature: _____ Date: _____

For Office Use Only

Approved: _____

Denied. Reason for Denial: _____

Authorized Signature: _____ Date: _____