

UFID _____ Last Name _____ First Name _____ MI _____ Date _____

Email Address: _____ Phone Number: _____

Term: Fall Spring Summer A Summer B Summer C Year _____

Were you assessed a late registration fee because of a University of Florida error? Yes No
If yes, attach a letter (on department letterhead) from the department responsible for the error, and explain below.

Were you assessed a late registration fee as the result of extraordinary circumstances, such as serious illness or a death in the immediate family, which prevented all conceivable means of complying with the established deadlines?
If yes, attach documentation and explain below. Yes No

If you answered NO to both of the above questions, you generally will not meet the established criteria for waiver of the late registration fee. Therefore, there is no reason to request a waiver.

Instructions: Return the completed and signed petition form and all relevant documentation by [secure upload](#).

NOTE: * Petitions submitted without documentation will be denied automatically.
* **Lack of funds is not a valid reason to waive the late registration fee.**
* **A decision will be available in five to seven business days. For your result, check your Petition Status on ONE.UF - one.uf.edu.**

Explanation:

I hereby certify that the information and documentation that I have submitted for this petition is true and accurate to the best of my knowledge.

Signature Date

FOR OFFICE USE ONLY

Waiver of Fee: Approved Denied Deferred for documentation until _____

Comments:

Signature of Authorized Representative Date