Fee Appeal Form -This form must be submitted within **60 days** of the end of term for which the adjustment is being requested. Late requests will **not** be considered. Appeals will be based on last date of attendance which may result in a balance due to The University of Akron. **Please return to:** The University of Akron, Student Accounts Office, Akron, OH 44325-6209, Or email cashier@uakron.edu. For appeal consideration related to third-party charges, students should contact the appropriate department directly: Housing: **reslife@uakron.edu**, Dining Plans: **myplans@uakron.edu**, Parking: **mgrove@uakron.edu**

Student Name:_____ ID#_____

Address:_____City:_____State:_____

Zip Code:_____ Phone:_____ Semester / Year of Request:_____

UA Email address:_____ Did you receive Financial Aid?_____

Fee appeal checklist: (must complete all prior to turning in appeal)

☐ Classes have been officially withdrawn.
☐ Written statement from student stating reason for appeal.
☐ Third party documentation (professional documentation: physician letter, death certificate, police report, etc.)
☐ This form, completed.

Valid Grounds for Appeal:

- Medical reasons for you or a family member: Medical Emergency must occur after the start of the semester for which the refund is requested. Pre-existing medical emergencies or conditions are not grounds for a refund (must be supported by a signed statement from attending physician on official letterhead and must include: dates of service, student unable to attend classes and when the student will be able to return to classes)
- Death of the student or immediate family member: Death must occur after the start of the semester for which the refund is requested (Immediate family includes spouse, mother, father, legal guardian, sibling or grandparent. Must be supported by a copy of death certificate or obituary notice)
- Military duty (must be supported by documentation from Military Services Office)

The University will NOT consider fee appeals based on (please initial this has been read):

_____ Failure to read the published University refund policy (found at http://www.uakron.edu/studentaccounts/refunds/)
_____ Lack of attendance in a class(es). Students must process an official registration/schedule adjustment form
_____ Disciplinary dismissal-See University rule 3359-60-02.2
_____ Financial hardship or lack of aid
_____ Dropping courses to avoid low grades
_____ Work/life stress or dissatisfaction with instruction or course
_____ Arrests not involving incarceration
_____ Forgetting registration or miscommunication via email
_____ Technical issues or unfamiliarity with online systems
_____ Charges from third-party providers—such as Book Bundle, Housing, and Meal Plans—**are not eligible** for tuition and fee appeals and will not be waived by the University

By signing below, I certify that I have read this form in its entirety. My statement and any attachments are, to the best of knowledge, true. I understand that changes made in my registration may also impact enrollment certifications that The University of Akron provides concerning my insurance, student loans, etc. I also understand the financial aid implications (see below if applicable). All decisions made by the committee are **final**. Outcomes will be emailed to the UA address on file.

Student Signature:_____ Date:_____

** **Financial aid recipients:** Your financial aid and student account will be adjusted to reflect any financial changes that may result from a successful appeal, i.e. revised charges and revised financial aid. This could result in you owing a balance to The University of Akron for charges paid by financial aid and for any financial aid refund money you received directly but did not earn based on your non-attendance.

Questions? Please contact us at 330-972-5100