UCSB
University of California
Santa Barbara

REQUEST FOR FEE WAIVER

Office of the Registrar
University of California, Santa Barbara
Santa Barbara, CA 93106-2015
Phone: 805-893-3592
FAX: 805-893-2985
http://www.registrar.ucsb.edu

Instructions:

1. Read the information below. If the situation meets the criteria noted, complete this petition.
2. Obtain verifying signatures and attach supporting documents.
3. Submit the signed, complete petition to the Office of the Registrar.

Directive from the President of the University, June 26, 1963

Student fines and penalties are waived under the following regulation:

1. The decision to waive a specific student fine or penalty shall be the sole responsibility of the office assessing that fine or penalty.
2. Student fines and penalties shall be waived only if they result from action or inaction on the part of the University, not the student. Additionally, a waiver should be granted to each student whose failure to act was caused by a sudden and debilitating illness or accident.

Name _____ **Perm** _____
Last First Middle

Address _____
Street City State Zip

U-Mail _____ **Phone (_____)**_____

Action Requested:

Waiver of $50 **Late Registration** fee for: ❑ **Fall** _____ ❑ **Winter** _____ ❑ **Spring** _____
Year Year Year

Waiver of $50 **Late Payment** fee for: ❑ **Fall** _____ ❑ **Winter** _____ ❑ **Spring** _____
Year Year Year

Waiver of $3 **Schedule Adjustment** fee for: ❑ **Fall** _____ ❑ **Winter** _____ ❑ **Spring** _____
Year Year Year

Reason for the request:

NOTE – If the request is not due to University error, provide details of the circumstances and attach supporting documents.

_____ _____
Student Signature **Date**

NOTE – If the request is due to University error, a representative must sign and attach written justification to this form.

_____ _____
Representative's Name and Title **Office/Dept**

_____ _____
Representative's Signature **Date**

Office of the Registrar Use Only

Recommendation _____ **Committee Decision:** ❑ **Approved** ❑ **Denied**

Code _____ **Date** _____ **Initials** _____

Y-Y-2000058