

Student Number E _____

EASTERN MICHIGAN UNIVERSITY
Office of Financial Aid
Installment/Late Fee Appeal Form

Student Name _____

Please read all instructions before filling out this form.

Please check the semester for which you are appealing the late/installment fee(s). All appeals go through **two** offices, **Financial Aid and Student Business Services** before a decision is made. You may call our office after 30 days to receive the decision. If your dispute is approved, we will request that the Student Business Services Office remove your late/installment fee(s). If your appeal is denied and you wish to appeal further, you must write a letter to the Review Committee, Office of Financial Aid, 403 Pierce Hall, Ypsilanti, MI 48197. The Committee will review your appeal and notify you in writing of the decision. Regardless of the decision by the Office of Financial Aid, **the Student Business Services Office will make the final decision on removal of fees. Student Business Services will not remove fees if you have a balance over \$100.00 which is not covered by financial aid.**

_____ **FALL 2007**

You must have submitted all documents by August 1, 2007 and your financial aid must exceed the balance due for Fall 2007.

_____ **WINTER 2008**

You must have submitted all documents by November 14, 2007 and your financial aid must exceed the balance due for Winter 2008.

_____ **SPRING 2008**

You must have submitted all documents by March 6, 2008 and your financial aid must exceed the amount due for Spring 2008.

_____ **SUMMER 2008**

You must have submitted all documents by April 17, 2008 and your financial aid must exceed the balance due for Summer 2008.

Comments may be written on the back of this form.

Signature: _____ Date: _____

Office of Financial Aid Use Only

_____ Approved: Installment/Late fee(s) will be waived for _____ semester(s).

_____ Denied: The file was not complete until _____, therefore processing and payment of aid was delayed.

Staff Initials _____

Student Business Services Office Use Only

_____ Approved: Installment/Late fee(s) will be waived for _____ semester(s).

Staff Initials _____