Tuition Re-Appeal
EASTERN MICHIGAN UNIVERSITY

DEADLINE: Tuition re-appeals **must** be submitted **no later than 1 month** from the date on the tuition appeal denial email. Tuition re-appeals are only considered for extraordinary circumstances or University error. Filing a re-appeal does not relieve your current obligation to EMU. You are responsible for all charges assessed on your account while your re-appeal is pending.

Last Name	First Name	EID
Street Address		
City	State	Zip Code
Home Telephone Number	Work Telephone Number	Cell Phone Number
Semester for Appeal	Academic Level (circle one) *Undergraduate* *Graduate*	Email Address

Course Name and Prefix	CRN	Credit Hours	Drop/Withdrawal Date

You **must** read the following and initial the space provided next to each guideline. Failure to do so or comply with the guidelines will result in immediate denial.

___ I understand that I will receive all correspondence, including approval/denial notification, by the email address I provided above.

___ I understand that if these courses were part of a conferred degree, my re-appeal will be automatically denied.

___ Even if my tuition re-appeal is approved, I understand that I will still be responsible for the $40 non-refundable registration fee and will pay it in full within one week of the email notification.

___ By request to the Office of Records and Registration or online, I have already withdrawn from the class(es) listed above.

___ I understand that if I have financial aid, it is in my best interest to consult with a financial aid advisor and have him/her initial the box below **prior** to submitting the tuition re-appeal. If my re-appeal is approved, my financial aid may/will be canceled and I may/will owe back EMU any refunds that I have received. I understand that if I submit this re-appeal without consulting a financial aid advisor, I waive my right to financial aid advising regarding this situation and I will be held responsible for any charges on my account after the re-appeal process is complete.

_____ _____
Student Signature Date

FOR OFFICE USE ONLY									
Approved _____%	Denied: ☐	Added to W: Drive By	Date	COLL 3rd PTY FIN AID		**OFA Advisor Initials:**			
Authorized Signature		Title	Date	Sent to Financial Aid By	Date	Sent to Registration By	Date		
Fees Processed By	Date	W: Drive Updated By	Date	Email Sent By	Date	Other Information			