Appeals submitted via email must be received from the student’s CSU email account.

DUE: 4:30PM Friday of Finals week

A decision will be e-mailed to the student approximately four weeks (depending on time of year) from receipt of the completed packet.

Student’s Name _______________________________ CSU ID _______________________________

Course ___________________________ Semester Taken ____________________________

Subject Number Semester Year

Email Address __________________________@rams.colostate.edu

Submission of this appeal assumes complete documentation and information provided after the submission will not be considered for the appeal. Submission of all requested materials and documentation is not a guarantee that your appeal will be approved.

I understand the decision regarding my appeal is final.

Student Signature: _______________________________ Date Submitted: _______________________________

REASON FOR LATE REGISTRATION FEE APPEAL

_____ Extenuating circumstances (include #1 and #2 below)

_____ University error: Student registered for first course after the term start date and/or registered for course(s) after the add/drop period because of university error (include #1 and #3 below).

ALL DOCUMENTATION MUST BE TYPED please include your CSUID# (handwritten documentation will not be accepted)

1. Student letter explaining reason for the late registration.

2. Documentation of any extenuating circumstances beyond student’s control that prevented the student from registering before the first day of classes or for registering before the Add/Drop deadline (e.g., medical condition, death of a family member, accident, etc.).

3. Documentation from university faculty/staff member who incorrectly advised the student or gave information resulting in university error MUST accompany this appeal or the appeal will not be reviewed. An appeal indicating that the student did not know about the registration deadlines will not be approved.

Advisor or Department Chair signature __________________________ Date __________________________

Advisor or Department Chair/Head name (printed) __________________________ Phone __________________________ Department __________________________

Bring completed form (with all signatures) with documentation to the Office of the Registrar, 100 Centennial Hall

Revised: November 2019
DECISION REGARDING $50 LATE REGISTRATION FEE APPEAL

Date request reviewed in Office of the Registrar: ____________________________

If applicable: Decision of Registrar (via permission from the Vice Provost for Undergraduate Affairs)

Action: Approved ___   Forward to VPUA or Graduate School for decision ___

_________________________________________  ________________
Registrar or Registrar Designee               Date

Date request reviewed in Vice Provost Office/Graduate School: _____________

The decision of the Vice Provost or Dean of the Graduate School for approval or denial is final.

Action: Approved ___

Denied ___

_________________________________________  ________________
Vice Provost for Undergraduate Affairs or    Date
    Dean of the Graduate School

Comments: