



\$50 LATE REGISTRATION APPEAL

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

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
Dean of the Graduate School

Date

Comments:

FORM DIRECTIONS:

Submit this completed form no later than 4:30PM Friday of Finals Week to the Office of the Registrar. Bring the form in person with your photo ID to the Office of the Registrar, Centennial Hall or email it to registrarsoffice@colostate.edu from your CSU email address.