



College of Law Registrar's Office

201 FAMU Law Lane, Orlando, Florida 32801

Email: law.registrar@famuedu Phone: (407)254-3279/3287 Fax: (407)254-3221

REQUEST TO WAIVE LATE REGISTRATION FEE

Term (Check One): Fall Spring Summer Year:

STUDENT INFORMATION

Form with fields for Student Last Name, Student ID Number, Student Address, City and State, Student FAMU Email Address, Student Signature, and Date.

PLEASE ANSWER THE FOLLOWING QUESTIONS AND INCLUDE SUPPORTING DOCUMENTATION

- A. Were you assessed the late registration fee due to a problem with financial aid?
B. Were you assessed the late registration fee due to a University error?
C. Were you assessed the late registration fee due to extraordinary circumstances such as illness or death in the family?

EXPLANATION FOR REQUESTING THE LATE REGISTRATION FEE TO BE WAIVED

Blank lines for providing an explanation for requesting the late registration fee to be waived.

Student Signature: _____ Date: _____

Sign and submit completed form with supporting documentation to law.registrar@famuedu

FOR OFFICE USE ONLY

Request is: Approved Denied

Remarks: _____

Department Representative Printed Name: _____

Department Representative Signature: _____ Date: _____