

WASHBURN UNIVERSITY BUSINESS OFFICE WAIVER REQUEST: PAYMENT PLAN ENROLLMENT FEE

Student Name:	WIN#
Requestor:	
☐ I am a Student☐ I am an Authorized User (<u>must</u> be set up in W	U-View for the student noted above)
I do hereby request that the Washburn University Be payment plan enrollment fee assessed for the waived if, on the date of this request, the student accound that enrollment in the payment plan will be removefund of the enrollment fee will be processed through approved for student accounts where direct loans we below, or for other reasons outside of the control of FAFSA submitted late or selected for verification, etc.	term. I realize that the fee will not be bunt has an outstanding balance due for the term yed at the time the fee is waived. If applicable, a bugh the student account. Waivers will not be ere delayed for reasons other than those noted the University (i.e., delay in scholarship receipt;
I request the enrollment fee be waived because:	
☐ Student is a first-term Freshman or first-time paid the account balance in full was delayed 3	•
☐ Student is attending a single term this acade paid the account balance in full was delayed u	mic year, and disbursement of financial aid that ntil the midpoint of the term
☐ Other (please describe)	
Student (or Authorized User) Signature	Date
(Print Name)	_

Please attach any additional information in the form of e-mails, etc., that support your request. We will review your request and <u>reply to the student's Washburn e-mail address</u> when a decision is made. Please allow up to two weeks for a response.