

The University of Southern Mississippi

Appeal for Tuition Charges

Instructions: Complete form, attach any appropriate documentation and send to:

Appeals Committee
Business Services
118 College Drive #5133
Hattiesburg, MS 39406-0001

Name:		Student ID:
Address:	Phone #:	Email:

TERM FALL SPRING SUMMER YEAR _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Did you attend any classes during the term covered by this appeal? If no, request each instructor to confirm this fact by emailing confirmation to Tommy.Hillman@usm.edu . YES NO

Please explain below why you did not attend any classes.

Were you enrolled at another institution during the term covered by this appeal? If yes, attach a certification of enrollment from the Registrar's Office of the institution you attended. YES NO

Are you requesting an exception due to extraordinary circumstances, such as family illness or death in family? YES
NO If yes, you **MUST** attach any supporting documentation, such as a letter from your doctor (with specific dates), obituary or copy of a death certificate and explain below.

Are you requesting an exception due to University error? If yes, **MUST** attach a letter from the department that made the error, and explain below. YES NO

PLEASE PROVIDE ADDITIONAL INFORMATION ABOUT YOUR APPEAL IN THE SPACE BELOW (you may attach additional pages, if necessary):

Student Signature

Date

Committee: Review Date _____	Decision: APPROVED	DENIED
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