



## Procedure to Request a Department Equipment Fee Correction

**Overview of Purpose and Policy:** The Departmental Equipment Fee Correction Form is used to request an Equipment Fee be removed from a student's account. The fee will only be removed in cases of documented University error.

### I. Completing the Form

1. Begin by entering the student's EMPLID
2. Next, enter the first and last name of the student
3. Then, select the specific Fee Type to be removed
4. Provide the Fee Term
5. Include an explanation in the 'Description of University Error' field
6. **Attach supporting documentation for all students**

### II. Signing the Form

1. Two signatures are mandatory
2. The Approver signature must be from an upper-level Manager who has the authority to sign off on departmental charges, or is the Department Head
3. The Requestor signature must be the person who prepared the form
4. The Requestor and the Approver should sign, print their names, and input the date in the appropriate fields

### III. Submitting the Form

1. You may e-mail the form to [CTL-waiver@fsu.edu](mailto:CTL-waiver@fsu.edu) in signed PDF format via the button at the bottom of the form
2. The form may be faxed to (850) 644-5142, Attn: Waiver Coordinator
3. The form may be dropped off at The Office of Student Business Services, located in University Center A, room 1500
4. **You must keep a copy of the form and any accompanying back up information in your office for auditing purposes**

### Questions?

Our Office is located at A1500 University Center. Student Business Services Hours: 8:30 a.m. - 4:30 p.m., Monday- Friday. Call 850-644-9452 and ask for the Waiver Coordinator.



[Submit a Case](#)

## Department Equipment Fee Correction Form

**Instructions:** All fields must be completed, an explanation for the adjustment of the charge(s) must be provided, authorization must be from an upper-level administrator who has the authority to sign off on departmental charges, and supporting documentation *must* be provided for each student. Established Equipment Fees can only be waived in cases of documented University error.

<b>Department:</b>	<b>Prepared by:</b>	<b>Contact Number:</b>

	EMPLID	Last Name	First Name	Fee Type	Fee Term	Description of University Error	For SBS Office Use Only (Circle One)
1.							Accept / Deny
2.							Accept / Deny
3.							Accept / Deny
4.							Accept / Deny
5.							Accept / Deny
6.							Accept / Deny
7.							Accept / Deny
8.							Accept / Deny
9.							Accept / Deny
10.							Accept / Deny

Requestor Signature:  Print Name:  Date:

Approver Signature:  Print Name:  Date:

Controller's Office Only:

Date: _____
Initials: _____