



**OFFICE OF THE REGISTRAR**

777 Glades Road  
P.O. Box 3091  
Boca Raton, Florida 33431-0991  
Telephone: 561.297.3050  
Fax: 561.297.2756  
e-mail: registrar@fau.edu

**FISCAL REINSTATEMENT APPEAL**

Complete and return this form to the Registrar's Office on any campus.  
It is University Policy that students be reinstated into the initial Registration.

Name: \_\_\_\_\_ Student I.D. (Z #): \_\_\_\_\_  
(please print)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Phone: Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

FAU E-mail: \_\_\_\_\_

Semester Appealing (include year): \_\_\_\_\_

*NOTE: Students may be reinstated ONLY ONCE following a fiscal cancellation during their course of study at FAU.*

*NOTE: If reinstatement is for a prior term, the Registrar's Office will contact your department for a grade. However, if the grade is not submitted by the department, it is the student's responsibility to contact the professor for the grade.*

Briefly indicate the reason for non-payment of tuition (if approved, payment is due immediately and you will be charged a late payment fee and a reinstatement fee in addition to your tuition).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ACTION TAKEN**

**Approved**

**Denied**

Show validated schedule to professors.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In the future, should you have difficulty meeting your financial obligation to FAU, please contact the Cashier's Office prior to the end of the drop/add period.