

REQUEST FOR FEE DEFERRAL FORM-Other (excluding student loan)

Students who wish to request a fee deferral should do so by completing this form and sending it, with supporting documentation, to the Student Financial Accounts office, by email or by fax to the contact information on the top right corner of this form. A fee deferral, if approved, will be placed on your student account until the day after fee payment deadline. Fee deferrals are not guaranteed and must be submitted by the fee deferral deadline to be considered (4pm on the fee payment deadline date). Please note: *Students awaiting visa or study permit authorization do not qualify for a fee deferral.*

Family Name	Given Name	Term
Student Number	Telephone	Email Address
Today's Date		Status: <input type="checkbox"/> New student <input type="checkbox"/> Current student
Fee Deferral Eligibility Requirements – SELECT THE ONE THAT APPLIES TO YOU AND ATTACH SUPPORTING DOCUMENTS		
<input type="checkbox"/> International money transfer/wire transfer in transit. Date of transfer: _____		
OR		
<input type="checkbox"/> Sponsored Student (Name of Sponsor or Sponsorship letter attached): _____		
OR		
<input type="checkbox"/> Other (Explain): _____		
Student Declaration: I declare that the information on this request form is true and complete to the best of my knowledge. I have read and understood this request form and agree to the following terms and conditions:		
<ul style="list-style-type: none"> ❖ I acknowledge that I will be responsible for payment of any outstanding fees on my student account should any anticipated funding noted on this request form be denied or postponed or withheld for any other reason ❖ I acknowledge that I am responsible for the full payment of fees and subject to university fee policy, even with an authorized fee deferral ❖ I understand that it is my responsibility to ensure my registration record is accurate and up to date and that I am responsible for dropping or withdrawing from course(s) as per the published university deadlines. Should I subsequently drop or withdraw from course(s), I acknowledge that I am responsible for payment of my fees at Capilano University and/or any penalty assessment ❖ I agree to the collection and exchange of this information provided on this form. 		
Student Signature (indicating that declaration has been read and accepted)	Office Use Only: Approved Signature	
	Approved	Denied
Date		