Comprehensive Fee Waiver Request
Return form to: Office of Student Accounts
University at Buffalo
232 Capen Hall
Buffalo, NY 14260
Phone: 716-645-1800 Fax: 716-645-7771
Email: UBstudentaccounts@buffalo.edu

Fall 2016- September 6, 2016

Last Name: ___________________ First Name: ___________________ MI: ___ UB Person Number: ____________

To be eligible for a partial waiver of the Comprehensive Fee, all of the following criteria must be met:
1) Study takes place outside of the University at Buffalo grounds and
2) The student DOES NOT have a current UB parking permit

If you meet all of the above criteria, you may be considered for a partial waiver of the Comprehensive Fee. Students may be eligible to waive the Health Services, Transportation, Campus Life and Athletics Fee. The College Fee, Technology Fee and Transcript Fee cannot be waived. You may apply for a waiver for the current or next semester. You must submit a new waiver for each semester. Please provide the following information.

Date: _______________________

Address:
________________________________________________________________________
City _____________________ State ___________ Postal Code ____________

Daytime Phone: ____________________________

Email address: ___________________________ @buffalo.edu

Semester (for which you are requesting a waiver):
________________________________________________________________________

Reason for request:
________________________________________________________________________

Please Note: If we cannot determine if your course(s) are online or off campus, we will email you a department verification form. You will need to have the department who offers the course(s) complete the form and return it to our office before your waiver can be processed.