

Tuition Rate Appeal Form

STUDENT INFORMATION (please print clearly)				
Last Name:	First Name:		MI:	
TSU Student ID: T#	Email:	@my.tnstat	te.edu	
Tuition Rate:	Scholar Rate Plus	☐ 250-Mile Radius		
Appeal Term: Fall 20 S ₁	pring 20			
Previous Appeal: Yes No				
ВА	SIS FOR APPEAL (p	lease check one)		
☐ Graduation - I am a senior who w (Written confirmation ☐ Hours Earned - I did not complete to one course during the	vill graduate this semeste on from my academic de the required 15 hours bea	OTE: This appeal is only applicable	tached). in only	
CI	ERITIFICATION STAT	TEMENTS		
Please read and initial each of the followin	ıg:			
I certify that all information on this a	appeal form and supporti	ng documentation is true.		
I understand that the submission of the	his appeal does not guara	antee approval.		
Please read and initial each of the followin I understand that loss of the Scholar in the Earned Hours A	Rate /Scholar Rate PLU	S due to the Cumulative GPA cann	not be appealed.	
Student's Signature		Date		

Please submit this completed form and any supporting documentations to:

Office of Enrollment Services Floyd Payne Campus Center Room 323 Email: EnrollmentMgt@tnstate.edu Fax: (615) 963-2929

For Office Use Only	Please print t	Please print the SHATERM screen and attach it to this form.			
□Approved	□Denied				
Comments:					
Processed by:		Date:			
SGASADD□	SPACMNT□	NOTIFICATION: MyTSU EMAIL			