



Bowling Green State University

Complete this form and take or fax to:

BURSAR'S OFFICE
Room 132 Administration Building
Attention: Chris Kieffer
FAX: 419-372-0280

I, the undersigned, have filed an application for waiver of the non-resident fee under the Ohio Board of Regents Regulations for the academic term **Fall/Spring/Summer (circle one), year 20_____** .

As a result, I understand that I do not have to pay the non-resident fee for the **Fall/Spring/Summer (circle one)** term at this time. However, I do realize that I am responsible for paying all other fees (instructional, general, special lab fees and other) and miscellaneous charges **prior to the beginning of classes. If my residency application is not approved by the end of the academic term for which I am applying, I understand I must pay the non-resident fee no later than the last day of the term to allow continued enrollment.**

In the event that I am ruled to be a non-resident for tuition and surcharge purposes, I will promptly pay, or request that the appropriate department or agency promptly pay, any non-resident fee(s) due on my account with the University.

Signature _____

Name (print) _____

Date _____

Social Security _____

BGSU ID _____

Local Address _____

Local Phone _____