Student Health & Counseling Center A Division of Student Affairs

Phone: (657) 278-2800 Fax: (657) 278-3069

No Show/Late Appeal Form

Name			
Address			
City			State Zip Code
Phone Nun	nber		
Email			
CWID		Date of Appointment	
Justificatio	n Statement		

I understand the appeal process can take up to 30 business days before a decision is made. I also understand that the appeal process is not a guarantee of reversal of the \$20 No Show/Late fee.

You must submit your Appeal within 30 days from your scheduled appointment to be considered.

Please print this form and either fax or hand deliver it to the Student Health & Counseling Center.

Communication for No Shows is done via your CSUF email.