

## Florida Prepaid Plan Opt-Out Form

**Panther ID:** \_\_\_\_\_ **Effective Term:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Student's Social Security Number:** \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Contact me at:** \_\_\_\_\_  
Phone or Email Address

*I authorize the FIU Student Financials Office to make the following adjustment to the standard Florida prepaid billing process for the term identified above*

### Check One

\_\_\_\_\_ Do not bill the Florida Prepaid Plan for my covered tuition expenses this term

\_\_\_\_\_ Bill the Florida Prepaid Plan for this specific number of credit hours \_\_\_\_\_ only

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*I understand this request must be received in the Student Financials Office prior to the last day to pay fees as published on the FIU Academic Calendar.*

*I understand this request is for this term only and normal billing to Florida Prepaid will resume for subsequent terms unless I request FIU otherwise in writing.*

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

FIU Use Only:	Processed by _____	_____ Cancelled from Contract
	Process date: _____	_____ New Student Maximum Amount

**To Submit:** Scan the completed Florida Prepaid Opt-Out form and login to my.FIU.edu. Click on "Upload My Documents" link. Select Student Financials Department, then Florida Prepaid Opt-Out Form