

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

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 FPP Opt Out form and login to my.FIU.edu. Click on "Student Tools" tile then "Document Upload". Select "Student Financials" Department, then "Florida Prepaid Optout".