

### Late Payment Request Form

For student who unable to make a payment on time due to exceptional circumstances beyond their control. Fill and submit completed forms to the MIR Office.

<b>Student Name:</b>	
Student ID:	Advisor:
Program: <input type="checkbox"/> MIR <input type="checkbox"/> BMIR Graduate	Year: <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Other .....
Address:	
Telephone:	Mobile Phone:
Fax:	E-mail Address:

I request for late payment for Semester \_\_\_\_\_

Reason for late payment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Request date of payment: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

<p><b>For Program Use Only</b>                  Officer's Comment:</p>   <p>Signature: _____</p> <p>Date: _____</p>	<p>Associate Dean for Academic and International Affairs'                  Comment:</p> <p><input type="checkbox"/> Approved:</p> <p><input type="checkbox"/> Denied. Reason for Denial: _____</p> <p>_____</p> <p>_____</p> <p>Signature: _____</p> <p>Date: _____</p>
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