

Institutional College Opportunity Fund (COF) Waiver

Name: _____	
Date of Birth: _____	Student ID#: _____
E-mail: _____	Phone Number: _____
<p>I affirm that I have read, understood, and agreed to this form in its entirety and that the information supplied is true and complete. If false information including falsified supporting documentation is found, the request will become void and the resultant action will be retroactively nullified</p>	
Signature: _____	Date: _____

The College Opportunity Fund allows all resident, undergraduate students to apply the COF stipend to a maximum of 145 credit hours. Students can use this one-time waiver to apply for **up to 3 consecutive semesters of additional COF hours** and must be used within that time. Review your COF lifetime “hours used” balance on the College Assist website: <http://cof.college-assist.org>.

Policy:

- A COF waiver does not exempt you from tuition, fees, late and service charges or financial holds.
- This process does not address tuition refunds for course drop or withdrawal, class fees, late enrollment, grades or grade changes, tuition classification, or other academic policies or regulations.
- File as soon as you identify you need a waiver – The University will not retroactively apply hours for prior terms.
- Decisions can take up to two weeks – You will be notified through your student email if your waiver has been approved or denied.
 - DENIED: If a student has not successfully completed at least one semester at MSU Denver.
 - DENIED: If a student has already submitted a COF Waiver for a previous semester.
 - If you are denied or seeking more hours after this waiver is used, you will need to appeal with the Colorado Commission on Higher Education (CCHE): http://higherred.colorado.gov/finance/cof/COFWaiverApp_061915.pdf.
- If you have not received a baccalaureate degree at the end of the waiver period and choose to continue your course work, you must pay full tuition (without COF stipend credit) for all hours in excess of the hours added to my COF lifetime limit.

Deadline: The deadline is different for each term so please refer to the Academic Calendar for the specific term you are applying for.

Year and Term to *Begin* COF Waiver: _____

Office Use Only	
Identity confirmed by: _____	Date: _____
Processor/Approver: _____	Date: _____
Approved: ____ Denied: ____ Has not completed a semester at MSU Denver ____ Previously granted waiver	