



UNIVERSITY OF WISCONSIN
RIVER FALLS

Office of Enrollment Services
Telephone: (715) 425-3145
FAX: (715) 425-3390

Mailing Address:

215 North Hall, 410 S. Third Street
River Falls, WI 54022

Electronic Billing Exemption Request

Section A: Student Information

Falcon ID: W _____

Date of Request _____

NAME: _____
(Last) (First) (Middle Initial)

HOME ADDRESS: _____

(City) (State) (Zip Code)

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

Electronic billing is required for all currently enrolled students. In Section B please describe your reasons for requesting paper bills. Please be aware that exceptions are generally only granted for one of two reasons:

1. Disability of the student. Family member disability is generally not an exception. Students have access to provide paper bills to disabled family members or others who are paying on behalf of the student.
2. Lack of student internet access. Only students registered exclusively in off-campus courses or independent study courses not offered on line would be considered for this exemption reason. Lack of internet access by family members is generally not an exception. Students have access to provide paper bills to family members or others who are paying on behalf of the student.

Section B: Reason for Exemption.

By signing this form you are certifying that you read and understood the information above and the information that you provided is true.

(Student Signature)

(Date)