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| **About this form** | | | | | | | | | | | |
| **Please note that fines will not be waived under the following circumstances:** | | | | | | | | | | | |
| * You forgot when the book was due back * You did not receive a courtesy email reminder * You were on holiday, on placement or abroad * You had no access to the internet * The book was on hold for another user * The book had been renewed for the maximum loan period (84 days) * You were unable to log in to your library account online   We will not normally waive fines from longer than 6 months ago, unless you can provide supporting documentation which explains the delay in submitting a Fines and Disputes form. | | | | | | | | | | | |
| **We may waive fines or charges in the following circumstances:** | | | | | | | | | | | |
| * **Medical**: you were ill and could not get in to university, please submit a medical certificate or supporting statement from a University member of staff who can confirm the dates you were absent. * **Personal** for example: family illness, please supply a supporting statement from your school or from one of the University Support Services confirming special circumstances. We do not need to know the details * **Bereavement:** under these circumstances fines can normally be waived at the Library desk * **Other**: You returned the books and have a self-return receipt.   The books were stolen, you have a crime reference number. A pink Loss Report slip will not be accepted. | | | | | | | | | | | |
| **Can anyone help me with the form?** | | | | | | | | | | | |
| A student adviser, an academic adviser or tutor can help. | | | | | | | | | | | |
| **Applicant’s details** | | | | | | | | | | | |
| Forename: | | | |  | | | | | | | |
| Surname: | | | |  | | | | | | | |
| Student or library number: | | | |  | | | | | | | |
| Personal email address: | | | |  | | | | | | | |
| Phone number: | | | |  | | | | | | | |
| Dispute details | | | | | | | | | | | |
| I am asking you to waive my fines for (please tick): | | | Medical reasons | | | Personal reasons | | | | Other reasons | |
| **Please tell us the dates you are disputing fines from:** | | | | | |  | | | | | |
| **I am being fined or am in dispute over these items:** | | | | | | | | | | | |
| **I have scanned and sent these documents (please tick):** | | **None** | | | **Medical:** GP certificate or letter, or Self-Certificate | | | **Personal:** statement from GCU staff member | | | **Other:** self-return receipt or printout of self renewal screen |
| **Please tell us why you think we should waive your fines or why you want to dispute an item on your library record:** | | | | | | | | | | | |
| Declaration: | | | | | | | | | | | |
| I declare that all the information submitted in this form is true: | | | | | | | | | | | |
| **Signature:** |  | | | | | | **Date:** | |  | | |