

No-Show/Late Cancellation Fee Appeal Form

Campus Health & Wellbeing, with the support of the Student Healthcare Advisory Committee, has reinstated a no show fee for appointments canceled without 24 hours advance notice. The fee is \$15 per session. When an appointment is canceled at the last minute or no-showed, professional clinical time goes unused. By charging a no show fee, CH&W hopes to better utilize the vacated appointment space thereby increasing availability of appointments, which increases students' access to services. Fees collected go directly to the Compassionate Care Fund (CCF), which pays for health-related expenses on behalf of students who cannot afford costs of medication, durable medical goods, or related items.

If we have made an error in scheduling or you believe you deserve special consideration for a "No-Show/Late Cancellation Fee", please complete the following information (along with any supporting documentation you may have).

Completed forms must be received by the Cal Poly Health Center no later than three days from the date of the missed appointment.

The form can be submitted to us by:

- Submitting the form in person during CH&W regular business hours
- Faxing the form to (805) 756-5298
- Emailing the form to health@calpoly.edu (Medical Appointments)
- Emailing the form to counseling@calpoly.edu (Counseling Appointments)

Personal Information

Name:

Last

First

M.I.

DOB:

Empl ID:

Phone: ()

E-Mail:

Missed or Late Canceled Appointment Information

Date the appointment was missed or late canceled:		Time the appointment was missed or late canceled:	
Name of Provider you were to see:			
Describe the reason for requesting special consideration:			

For internal use only

Signature of Reviewer

Date

- Approved
- Denied