

COF Waiver Guidelines

The College Opportunity Fund (COF) tuition stipend is limited to 145 credit hours for a baccalaureate degree and 30 credit hours of post-baccalaureate work. A student who exceeds the 145 lifetime limit is eligible for one waiver from the institution, as well as one waiver from the Colorado Commission on Higher Education (CCHE). The institutional waiver is good for up to one year, or 3 consecutive terms (including summer).

You may not apply for this waiver until you have less than 25 COF hours remaining. You can review your balance of hours used through UCDAccess Portal or through the College Assist website: <https://cof.college-assist.org>.

Deadlines to submit the COF Waiver:

- Fall term: December 1st
- Spring term: May 1st
- Summer term: July 15th

Instructions – your COF Waiver Request must include the following:

- Completed COF Waiver Request Form, which includes a signature from your academic or major advisor.
- Please return your complete COF Waiver form either through email at cof@ucdenver.edu or in person to the Office of the Registrar located on the 5th floor of the Student Commons Building at 1201 Larimer Street, Denver, CO 80204.

Review Process:

- All COF Waiver requests are reviewed by the Office of the Registrar within 10 business days
- Decisions are sent to students' ucdenver.edu email account
- If approved, students will continue to receive the COF stipend on all eligible credit hours for three consecutive terms, including summer.
- If denied, a student may [submit an appeal](#) to the state of Colorado.
 - Students will receive a denial if they previously submitted, and were approved, for a COF waiver in a previous semester.

General COF Policies:

- A COF Waiver Request does not exempt you from tuition, fees, late and service charges or financial holds.
- Students are responsible for monitoring their COF available hours and should apply prior to exceeding their COF lifetime hours.
- This Waiver does not apply retroactively to hours already taken in prior terms that exceeded the COF lifetime hour limit.
- This process does not address tuition refunds for course drops or withdrawals, class fees, late enrollment, grade or grade changes, tuition classification, academic advising or other academic policy or regulations.

If you have any questions about the COF Waiver Process, please contact the Registrar's Office at 303-315-2600 or cof@ucdenver.edu.

COF WAIVER FORM

Last Name	First Name	MI	Student ID Number
-----------	------------	----	-------------------

Email Address	Phone Number
---------------	--------------

I have reviewed my academic progress with my advisor. We agree that I will need to complete _____ additional credit hours to receive a baccalaureate degree. I will complete these hours over the following consecutive terms:

Semester/Year: _____	Credit hours anticipated: _____
----------------------	---------------------------------

Semester/Year: _____	Credit hours anticipated: _____
----------------------	---------------------------------

Semester/Year: _____	Credit hours anticipated: _____
----------------------	---------------------------------

Advisor: _____

Name	Signature
_____	_____
Phone	E-mail

Certification Statement:

- ☐ I certify that to the best of my knowledge the information included in this waiver request is accurate, true and unaltered. If false information or falsified supporting documentation is found to have been included in this waiver request, the request becomes void, and the resultant action becomes retroactively nullified.
- ☐ I understand that if this COF institutional waiver is approved, it is a once in a lifetime waiver for the 145 COF lifetime hours limit, and all hours approved must be completed within three consecutive terms starting with the specified term (including summer).
- ☐ I understand that if I am denied an institutional extension or I have not received a baccalaureate degree at the end of the waiver period and choose to continue my coursework, I must pay full tuition (without COF stipend) for all hours in excess of the hours added to my COF lifetime limit. I understand I may apply for an extension from the CCHE.

Student's Signature	Date
---------------------	------

OFFICE USE ONLY

CURRENT STATUS:
Post-Bac: Yes or No

DECISION:

Denied or Approved Start Term: _____ End Term: _____