

The California State University / Office of the Chancellor / Risk Management and Public Safety
401 Golden Shore, 5th Floor / Long Beach, CA 90802-4210
(562) 951-4580 / www.calstate.edu/risk_management/claims

CSU Application for Leave to Present a Late Claim

Fill out, sign and attach this form to your completed CSU Claim Form if the claim is filed more than six months after the date of the incident.

Date: _____

Claim No. (If Known): _____

Date of Loss: _____

Date Claim Filed: _____

Claimant's Name: _____

Claimant's Date-of-birth: _____

Explanation for Late Filing (if more space is needed, please attach explanation to form): _____

I declare under penalty of perjury under the laws of the State of California that all the information I have provided is true and correct to the best of my information and belief. I further understand that if I have provided information that is false, intentionally incomplete, or misleading I may be charged with a crime punishable by up to one year in state prison and/or a fine of up to \$10,000 (Penal Code section 72).

Name (Printed)

Signature