



School Official Signature

Any applicant who is unable to pay the \$75 non-refundable application fee can apply for a fee waiver using this form. Please fill out the information below and submit this form with the rest of your application packet.

Instructions: Print or type the information below. By signing this form, you certify that you understand and meet the requirements to request an application fee waiver. Student Name Student Signature Student Address City State Zip Code Economic Need: Please select the reason(s) for your request for an application fee waiver. If no item is checked, the request will be denied. Student has experienced a Covid-19 related economic hardship. (e.g., Loss of Employment) Student is enrolled in a federal, state, or local program that aids students from low-income families (e.g., TRIO programs such as Upward Bound) Student's family receives public assistance. (e.g., programs such as TANF) Student lives in federally subsidized public housing or a foster home or is homeless. Student is a ward of the state or an orphan. Personal request from applicant: Explanation: DO NOT WRITE BELOW THIS LINE. FOR ADMISSIONS STAFF USE ONLY. **Admissions Official Decision**: □Approved ☐ Denied, Incomplete Application Certification: I certify that I have reviewed this student's application packet and it is complete. I further certify that I have reviewed the applicant's request for an application fee waiver and have rendered a decision. I certify that a copy of this form will be retained with the student's application packet in their official student record. School Official Name Title

Date