

Request for Admission Application Fee Waiver

SEND THIS FORM DIRECTLY TO THE POSTSECONDARY INSTITUTION/ORGANIZATION

TO: DEAN/DIRECTOR OF ADMISSION AT

TO: DEAN/DIRECTOR OF ADMISSIO	ON AI		
NAME OF COLLEGE OR UNIVERSITY			
STUDENT: Print or type the information	PRUNIVERSITY TATEMENT: I certify that I understand and meet all eligibility requirements to request an admission application fee waiver. STUDENT'S SIGNATURE CITY STATE ZIP FICIAL: Print or type the information requested below and check the indicator(s) of economic need. You must personally sign ment. FATEMENT: I certify that the student named on this form is either (a) currently enrolled in the 11th or 12th grade at this school, led, (b) an individual who is seeking enrollment as an undergraduate to an institution of postsecondary education; AND meets nomic need checked below. INAME AUTHORIZED OFFICIAL'S SIGNATURE DUCATIONAL INSTITUTION OR ORGANIZATION CEEB# OR PROGRAM# PHONE ED: The student must meet at least one of the following indicators of economic need. If no item is checked, the request will a received or is eligible to participate in the Federal Free or Reduced Price Lunch program (FRPL), natural family income falls within the income Eligibility Guidelines* set by the USDA Food and		
CERTIFICATION STATEMENT: I certif	y that I understand and meet all eli	gibility requirements to requ	uest an admission application fee waiver.
STUDENT'S NAME		STUDENT'S SIG	GNATURE
STUDENT'S ADDRESS	CITY	STATE	ZIP
AUTHORIZED OFFICIAL: Print or typ the Certification Statement.	e the information requested below	and check the indicator(s)	of economic need. You must personally sig
	พho is seeking enrollment as an เ		
AUTHORIZED OFFICIAL'S NAME		AUTHORIZED (OFFICIAL'S SIGNATURE
AUTHORIZED OFFICIAL'S TITLE		AUTHORIZED (OFFICIAL'S EMAIL
NAME OF SECONDARY EDUCATIONAL INSTITU	ITION OR ORGANIZATION	CEEB# OR PR	OGRAM#
ADDRESS		PHONE	
ECONOMIC NEED: The student mu be denied.	st meet at least one of the followin	g indicators of economic ne	eed. If no item is checked, the request will
 ☐ Student is enrolled in or eligted in Student's annual family inconstruction. ☐ Student is enrolled in a feder (e.g., GEAR UP or TRIO program. ☐ Student's family receives puted in Student lives in federally suted in Student is a ward of the state. 	pible to participate in the Fed ome falls within the income eral, state or local program to as such as Upward Bound). ablic assistance. absidized public housing, a face or an orphan. abool principal, high school co est to the student's circumstants	deral Free or Reduced Eligibility Guidelines*: hat aids students from oster home, or is hom counselor, financial aid ances. nces and after reviewir	I Price Lunch program (FRPL). set by the USDA Food and n low-income families eless. officer, community advisor/leader ng the eligibility guidelines, I

^{*}To view USDA Income Eligibility Guidelines for the Free or Reduced Price Lunch Program or review FAQs related to this form visit this USDA resource.