FEE WAIVER APPLICATION (GRADES 6-12)

Please read the School Fees Notice before completing the application!

All information on this application will be kept confidential

SECTION A: STUDENT INFORMATION AND BASIS FOR FEE WAIVER

Name of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of parent or guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check if applicable: (attach supporting documents for each category that applies)

\_\_\_\_\_\_ Student is eligible based on income verification (must attach copy of most recent tax filing)

\_\_\_\_\_\_ Student receives (SSI)\* Supplemental Security Income (qualified child with disabilities)

\_\_\_\_\_\_ Family receives TANF (currently qualified for financial assistance or food stamps)

\_\_\_\_\_\_ Student is in Foster Care (under Utah or local governmental supervision)

\_\_\_\_\_\_ Student is in State Custody

\*Please note: Students who receive Survivor Benefits Do Not Quality for the SSI category listed above.

Parent(s)/guardian(s) shall provide income eligibility documentation in the form of income tax returns or current pay stubs demonstrating compliance with requirements consistent with state law and school district policies and/or guidelines for all of the above qualifiers.

If none of the above apply but you wish to apply for fee waivers or other help with school fees because of serious financial problems, please state the reason(s) for the request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please check the school fee schedule and list all fees that you wish to have waived. If your student is eligible for fee waivers, all of those fees identified will be waived. **Please note that costs for yearbooks, class rings, letter jackets, school pictures, and similar items are not fees and will not be waived.**

Fee Description Amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please turn this application in to the front office when you have finished filling it out. All fee payments will be suspended until the school has determined if your student is eligible for fee waivers. The school shall require you to present proof of eligibility. State law requires schools or school districts to require documentation of fee waiver eligibility if parent must "apply for fee waivers."

I HEREBY CERTIFY THAT THE INFORMATION AND DOCUMENTATION I HAVE PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I ALSO GIVE SCHOOL OFFICIALS PERMISSION TO USE THIS FORM AS A RELEASE TO OBTAIN INFORMATION NECESSARY FOR VERIFICATION OF ELIGIBILITY.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_