

# College Admission Fee Waiver Application Form

**Instructions:** This form is designed to be printed and filled out. Please complete all sections clearly using blue or black ink. If you are completing this digitally before printing, use the text fields provided.

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## 1. Student Information

Last Name:

First/Middle Name:

Date of Birth (MM/DD/YYYY):

Email Address:

Phone Number:

Mailing Address (Street, Apt/Suite):

City:

State/Province:

Zip/Postal Code:

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## 2. Academic Information

Current High School / Secondary School Name:

High School City and State:

School Counselor Name:

School Counselor Email:

Name of College/University Applying To:

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## 3. Financial Eligibility Criteria

Please indicate your eligibility by typing "YES" next to any of the following indicators that apply to you:

Student has received or is eligible to receive a ACT or SAT fee waiver.

Student's annual family income falls within the Income Eligibility Guidelines set by the USDA Food and Nutrition Service.

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., SNAP, TANF).

Student lives in federally subsidized public housing, a foster home, or is homeless.

Student is a ward of the state or an orphan.

Total Number of People in Household:

Total Annual Household Income (USD):

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## 4. Certifications and Signatures

*Note: If printing this form to submit physically, please sign with a pen in the designated spaces below.*

### Student Certification

I certify that all the information on this form is true and complete to the best of my knowledge.

Student Printed Name:

Student Signature: \_\_\_\_\_

Date (MM/DD/YYYY):

### Authorized School Official Certification

I certify that the student named above is enrolled at our school and meets the financial eligibility criteria indicated on this form.

Authorized Official Printed Name:

Authorized Official Title (e.g., Counselor, Principal):

Authorized Official Signature: \_\_\_\_\_

Date (MM/DD/YYYY):