STANDARD FEE WAIVER APPLICATION

Date				School year	

All information provided in connection with this application will be kept confidential.

Name of student:				Grade in school	
Name of student:				Grade in school	
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Attendance Center/School:

Name of parent, guardian:
  or legal or actual custodian

Please check type of waiver desired:

Full waiver		Partial waiver		Temporary waiver	

Please check if the student or the student's family meets the financial eligibility criteria or is involved in one of the following programs:

Full waiver

	Free meals offered under the Children Nutrition Program (CNP)	
	The Family Investment Program (FIP) Transportation assistance under open enrollment	
	Foster care	
	Driver Education (resident attending or open enroll in)	

Partial waiver

	Reduced priced meals offered under the Children Nutrition Program

Temporary waiver

If none of the above apply, but you wish to apply for a temporary waiver of school fees because of serious financial problems, please state the reason for the request:

Signature of parent, guardian:
  or legal or actual custodian