



FEE WAIVER

All information on this application will be kept confidential STUDENT INFORMATION AND BASIS FOR DONATION WAIVER

Name of student: _____

Address: _____

Name of parent or guardian: _____

Grade level: _____ Phone number: _____ Email: _____

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

Student is eligible based on income verification

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) *Please note:

Students who receive Survivor Benefits Do Not Qualify for the SSI category listed above. If none of the above apply but you wish to apply for fee waivers or other help with school donations because of serious financial problems, please state the reason for the request:

_____ Please check the school fee schedule and list all donations that you wish to have waived. If your student is eligible for donation waivers, all of those fees identified will be waived.

2018/19 Please give this application to the Business Manager 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. You will then be given a written notice of that decision. 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." State law also requires that school districts provide alternatives in lieu of fee waivers, "to the fullest extent reasonably possible according to individual circumstances of both fee waiver applicant and school," consistent with local board policies and/or guidelines which may include tutorial assistance to other students, assistance before or after school to teachers and other school personnel on school related matters, and general community or home service. If your student is eligible for a waiver, the school cannot require you to agree to an installment payment plan or sign an IOU in place of a waiver. 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.

DATE: _____ PARENT'S OR GUARDIAN'S SIGNATURE _____

Fee Waiver Granted Date: By: