



Southern Illinois University Edwardsville

APPLICATION FEE WAIVER GUIDELINES

Recognizing that the Undergraduate Application Fee of \$30 may constitute a barrier to some students seeking admission to SIUE, the University has developed a procedure for requesting a waiver of the fee. Its criteria reflect the principles used to request waiver of the ACT and SAT fees. **(The application fee waiver is not available to SIUE School of Pharmacy applicants.)**

Eligibility Requirements

To qualify for waiver of the application fee, students must demonstrate economic need by meeting one or more of the following indicators:

- ✓ Student's family receives public assistance
- ✓ Student is a ward of the state
- ✓ Student resides in a foster home
- ✓ Student participates in the free or reduced lunch program at the school
- ✓ Student's total family income is at or below the maximum amounts established by the Bureau of Labor Statistics Low Standard Budget

Procedure

Requests must be submitted on a *current* SIUE request form. Forms are available from high schools, community colleges, or on the SIUE Web site at www.admissions.siu.edu.

The completed request is valid only if it is signed **both** by the student and a high school counselor or school representative who can verify economic need.

Incomplete requests cannot be processed. This form requires a signature, and therefore cannot be submitted electronically.

The completed waiver request or questions about the waiver process should be sent to:

Director of Admissions
Campus Box 1600
Southern Illinois University Edwardsville
Edwardsville IL 62026-1600

Approved _____

Date _____



Southern Illinois University Edwardsville

REQUEST FOR WAIVER OF APPLICATION FEE ACADEMIC YEAR 2006-2007

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Certification (both signatures are required):

I certify that one or more of the above waiver requirements have been met.

Student Name (Type or Print) / /
Social Security Number _____
Birth Date (MM/DD/YYYY)

Home Phone _____
Student's Signature _____
Date

Name of School or Agency Official (Print) _____
School/Agency Official Signature _____
Date

Name of School/Agency

Phone Number of School/Agency / - _____