

## Student Tuition/Fee Waiver Request

Student Name:

Student ID No.:

Course and Number of Credit Hours Requested for Waiver:

**Effective Term and Year of Waiver (Fall, Spring, Summer):** 

**Estimated Cost of the Tuition Waiver:** 

**Explanation/Rationale for the Waiver:** (attach additional documents if necessary)

Approvals:

Department Chairperson Date

Dean

Vice President, Provost Date

Vice President, Finance & Admin Date

Return this form with signatures to Student Business Services, Kent Wyatt Hall.

Date