



National Association for  
College Admission Counseling

# Request for Admission Application Fee Waiver

TO: DEAN/DIRECTOR OF ADMISSION AT

NAME OF COLLEGE OR UNIVERSITY

**STUDENT:** Print or type the information requested below. You must *personally* sign the Certification Statement.

**CERTIFICATION STATEMENT:** I certify that I understand and meet all eligibility requirements to request an admission application fee waiver.

STUDENT'S NAME

STUDENT'S SIGNATURE

STUDENT'S ADDRESS

CITY

STATE

ZIP

**AUTHORIZED OFFICIAL:** Print or type the information requested below and check at *least one* of the indicators of economic need. You must *personally* sign the Certification Statement.

**CERTIFICATION STATEMENT:** I certify that the student named on this form is either (a) currently enrolled in the 11th or 12th grade at this school, or if not currently enrolled, (b) an individual who is seeking enrollment as an undergraduate to an institution of postsecondary education; AND meet at *least one* of the indicators of economic need checked below.

Michelle Dance

AUTHORIZED OFFICIAL'S NAME

AUTHORIZED OFFICIAL'S SIGNATURE

Counselor

dance@fultonschools.org

AUTHORIZED OFFICIAL'S TITLE

AUTHORIZED OFFICIAL'S EMAIL

Tri-Cities High School

111175

NAME OF SECONDARY EDUCATIONAL INSTITUTION OR ORGANIZATION

CEEB# OR PROGRAM#

2575 Harris Street East Point, GA 30344

470-254-1830

ADDRESS

PHONE

**ECONOMIC NEED:** The student must meet at *least one* of the following indicators of economic need. If no item is checked, the request will be denied.

- ☒ Student has received or is eligible to receive an ACT or SAT testing fee waiver.
- ☒ Student is enrolled in or eligible to participate in the Federal Free or Reduced Price Lunch program (FRPL).
- ☐ 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., GEAR UP, TRIO such as Upward Bound or others).
- ☐ Student's family receives public assistance (e.g., SSI, SNAP, or others).
- ☐ Student lives in federally subsidized public housing, a foster home, or is homeless.
- ☐ Student is a ward of the state or an orphan.
- ☐ Student has applied to FAFSA and is eligible to receive Pell Grant (provide a copy of the most recent Student Aid Report – SAR).
- ☐ Other request from high school principal, high school counselor, financial aid officer, community advisor/leader or other official who can attest to the student's circumstances.

Given my knowledge of this student's family circumstances and after reviewing the eligibility guidelines, I believe that providing the application fee would present a hardship. Use the space below to explain or add supplemental information to the items above:

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**\*\*SEND THIS FORM DIRECTLY TO THE POSTSECONDARY INSTITUTION/ORGANIZATION\*\***

\*To view USDA Income Eligibility Guidelines for the Free or Reduced Price Lunch Program or review FAQs related to this form visit <http://bit.ly/NACACfeewaiver>.