

**APPLICATION FOR FEE WAIVERS WITH COMMUNITY SERVICE  
(GRADES 7 - 12)**

**Please read the School Fees Notice before completing the application!  
All information on this application will be kept confidential!**

Name of Student: \_\_\_\_\_

School: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Please check if applicable:

- \_\_\_\_\_ Student is eligible for Free School Lunch
- \_\_\_\_\_ Student receives supplemental Security Income (SSI)
- \_\_\_\_\_ Family receives Aid to Families with Dependent children (AFDC)
- \_\_\_\_\_ Student is in Foster Care (under Utah or local governmental supervision)
- \_\_\_\_\_ Student is in State Custody

If none of the above apply, but you wish to apply for fee waivers or other help with school fees because of serious financial problems, please state the reason (s) for the request:

\_\_\_\_\_  
\_\_\_\_\_

(If you need more space, please continue on the back of this page)

Please check the school fee schedule and list all fees that you wish to have waived. If your student is eligible for fee waivers, all of those fees will be waived and your student will be required to fulfill a community service obligation. **Please note that costs for lost or damaged school property or for yearbooks, class rings, letter jackets, school pictures and similar items are not fees and will not be waived.** If you wish to have all applicable fees waived, please write "all" in the "Fee Description" column.

Fee Description	Amount	Fee Description	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Please give this application to the Principal, Assistant Principal, or the School Fee Counselor 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 may require you to present proof of eligibility.** 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 I HAVE GIVEN 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