

Running Start Tuition Fee Waiver

Please complete this form and attach any required documentation for waiver consideration.

Low Income Tuition Fee Waiver is for the following school year:

Year: 20 20	
Student name (please print):	Phone:
Parent/Guardian Name (please print):	Phone:
Student ID OR SSN:	Email:
Student Address:	High School:
I am a Running Start student requesting a waiver of E Start Tuition Fee) as well as additional tuition costs for	BTC mandatory fees (i.e. placement testing fee, Running for the following reason:
Reduced Meals program at my school within the last	that I am currently, or have been eligible for the Free or st 5 years. I have attached a copy of my eligibility letter y an authorized person at my school or district office.
medical, TANF, or Basic Foods benefits statement lis	from a state or federal program. I have attached a copy of a sting my name. Documentation must include the student's ll re-apply annually, attaching current documentation, and I ges to my eligibility.
I am a Foster Youth and I am providing a signocumentation.	gned statement on letterhead from my caseworker as
above). I understand that I will be notified only if my I will not be notified, but my student schedule will re	I am attaching appropriate documentation if required (see y petition is denied or incomplete. If my petition is approved, effect that certain charges have been waived. I understand this course and program fees, and/or tuition and fees for classes
Student signature:	Date:
Parent/guardian signature:	Date:
Date Received:ApprovedDe	nnel (Free/Reduced Meals) or BTC Advisor (Other Documentation) Denied Notes:
Registration Coding Date: Authorizing Signature:	

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