Tuition Waiver Application

I, stated below, am requesting a tuition waiver for the term listed below. I understand that I must complete the Free Application for Federal Student Aid. The tuition waiver NICC offers is non-refundable and will only be applied to my bill if there is no other source of financial aid that I am qualified for and awarded for this class/term. A tuition waiver will be denied if the class is not completed successfully. I understand that any costs incurred are my responsibility if the terms are not met.

The maximum waiver is 100% of the cost of the course.

Please circle one and write the corresponding year: TERM: SU FA SP 20____

Place an “X” before the type of tuition waiver you are requesting.

____ Cultural Preservation
____ Employee / Board of Director
____ Child of Employee / Child of Board of Director
____ Elders (over 55)
____ Summer term continuing education
____ Institutional Waiver
____ Institutional Aid (i.e. Grant Matches/Dual Credit)*

__________________________________________
Printed Name

__________________________________________
Signature

__________________________________________
Date

*May not follow all rules of waiver.

FOR ADMINISTRATIVE USE ONLY:

_______ Approved _________ Rejected _________ ID # _________

Class(es) occurred during __________________________ Term

Student’s Bill for Class(es): $___________
Other F/A Awarded for /Class(es): (-) $___________
Unmet Need for Class(es) (=) $___________
Tuition Waiver Awarded for Class(es) (=) $___________
Student’s Responsibility for Class(es) (=) $___________

Student Billing: ___________________________ Date: __________

Financial Aid Director: ___________________________ Date: __________