

Form 802.2.2 – Student Fee Waiver Request

For reasons of financial hardship, I \_\_\_\_\_,  
request a waiver of school fees for the following student(s) enrolled at  
\_\_\_\_\_.

Name	Grade

Evidence of financial hardship may be required.

\_\_\_\_\_  
Signature of parent/guardian or independent student

\_\_\_\_\_  
Date

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For Office Use Only

Waiver of fees:

☐

Approved

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Not Approved

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date