

## FEE WAIVER REQUEST

Please complete if requesting a fee waiver based on temporary or ongoing economic hardships.

Information will be kept confidential.

Approvals are valid for the current school year only and dependent on available funds.

Parent Information	Student Information
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Last Name _____</div> <div style="width: 45%;">First Name _____</div> </div> <div style="margin-top: 10px;">Address/City/State/Zip _____</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">Cell Phone _____</div> <div style="width: 45%;">Work Phone _____</div> </div> <div style="margin-top: 10px;"> <p><b>Please check all applicable boxes that apply to your family and attach supporting documentation:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Unemployment Benefits</li> <li><input type="checkbox"/> TANF-Temporary Assistance for Needy Families</li> <li><input type="checkbox"/> SNAP-Supplemental Nutrition Assistance Program</li> <li><input type="checkbox"/> SSI-Supplemental Security Income</li> <li><input type="checkbox"/> Medicaid</li> <li><input type="checkbox"/> Foster Family caring for children in Foster Care</li> <li><input type="checkbox"/> McKinney-Vento</li> <li><input type="checkbox"/> Other (Please explain below.)</li> </ul> </div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Last Name _____</div> <div style="width: 45%;">First Name _____</div> </div> <div style="margin-top: 10px;"> <div style="display: flex; align-items: center;"> <input type="checkbox"/> 9<sup>th</sup> Grade           <input type="checkbox"/> 10<sup>th</sup> Grade           <input type="checkbox"/> 11<sup>th</sup> Grade           <input type="checkbox"/> 12<sup>th</sup> Grade         </div> </div> <div style="margin-top: 10px;"> <p><b>Please check for fees you are requesting to be waived (applies to the current school year only):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> \$5.00 9<sup>th</sup> OR 10<sup>th</sup> Grade Class Fee</li> <li><input type="checkbox"/> \$25.00 11<sup>th</sup> OR 12<sup>th</sup> Grade Class Fee</li> <li><input type="checkbox"/> \$35.00 Technology Fee</li> <li><input type="checkbox"/> Dual Enrollment Fees (per credit hour) Worksheet</li> </ul> <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 5px;"> <div style="text-align: center;">             _____ # of Credit Hours           </div> <div style="text-align: center;">             x \$15.00 = _____ Total Dual Enrollment           </div> </div> </div> <div style="margin-top: 10px; display: flex; justify-content: flex-end;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;"> <b>Grand Total</b> </div> <div style="border: 1px solid black; width: 150px; height: 30px;"></div> </div>

**Additional Details/Information:** \_\_\_\_\_

**My signature below signifies that the information shared in this document is true and correct:**

Parent/Guardian Signature	Date
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Please send the completed form (one for each student at CodeRVA) and documentation to the Main Office or  
[melody.krupnik@coderva.org](mailto:melody.krupnik@coderva.org)

OFFICE USE ONLY:	
<input type="checkbox"/> <b>Approved in Full</b> <input type="checkbox"/> <b>Approved Partial (Explanation):</b> _____ <input type="checkbox"/> <b>Denied (Explanation):</b> _____ <input type="checkbox"/> <b>Family Notified</b>	
Executive Director	Date