

VENTURES SCHOLAR FEE WAIVER
SWARTHMORE COLLEGE

STUDENT'S NAME: _____

Please complete this form, sign it and return it to us with your application. We are waiving your Swarthmore College application fee.

I am requesting that Swarthmore College waive my application fee.

STUDENT'S SIGNATURE: _____
(Do NOT Print)

COLLEGE COUNSELOR NAME: _____

COLLEGE COUNSELOR SIGNATURE: _____

****OFFICE USE ONLY****

DATE: _____

Dean of Admissions and Financial Aid