

**BOARD of GOVERNORS Basic Fee Waiver Scholarship
MATRICULATED STUDENT APPLICATION**

The Board of Governors of the State System of Higher Education of the Commonwealth of Pennsylvania, authorizes Bloomsburg University to award the Board of Governors Basic Fee Waiver. This funding is awarded to students pursuing academic programs of study determined to be in high need for the **full/partial tuition** payment for a full-time, undergraduate student at Bloomsburg University. Board of Governors tuition waiver recipients are required to perform **7.5 or 15 hours** of community service each semester, as well as fully participate in academic, career and personal development programs. This basic fee waiver may be extended up to a maximum of eight semesters if the recipient maintains satisfactory academic progress, attends mandatory functions, and is in good social standing at the university. This award may be cancelled by the Assistant Director of Diversity and Retention if the recipient is found to be in violation of state or federal laws, civil or criminal laws, and/or Bloomsburg University code of conduct. Appeal of award cancellation will be heard by the Director of Diversity and Retention.

GUIDELINES FOR SELECTION FOR THIS AWARD ARE AS FOLLOWS:

- Applicants must be residents of Pennsylvania.
- Applicants must have a cumulative grade point average of 2.8 or better.
- Applicants must have completed one year, full time at BU.
- Applicants must not currently be under disciplinary sanction greater than a letter of warning from Student Standards.
- Applicants for this scholarship have been accepted to and remain enrolled at Bloomsburg University.
- Applicants must complete the FAFSA form.

STUDENT- Please complete this section

Name: _____
(First) (Middle Initial) (Last)

PA resident: Yes / No Ethnicity: _____ Gender: Male / Female

Student ID #: _____ Home Telephone Number: _____ Number of earned credits _____

Email Address: _____ Cell Number: _____

Major or Intended Major: _____

Other campus discounts/scholarships (ex. CA, Presidential Leadership, CGA Scholarship, etc): _____

Application should include the following documents:

- 1) A typed, two-page, double-spaced essay describing your specific leadership skills, academic achievement, community service and/or any special talents you possess that will serve to enhance the Bloomsburg University community.
- 2) Two letters of recommendation that describe the candidate’s academic ability, involvement in the community and overall leadership potential.
- 3) Completed Discipline Waiver Form (attached).

Signature

Date

Return Completed Application to:

Further information: 570-389-2783

Office of Diversity and Retention
Bloomsburg University – SSC 039
400 East Second Street
Bloomsburg, PA 17815



Dean of Students Office
 Kehr Union Building
 Bloomsburg University

WAIVER FORM; DISCIPLINE WAIVER

University Requester Information: Office of Diversity & Retention	
Name	Title
Mr. Wayne Whitaker, Assistant Director	
Contact Information (extention/email address)	
X4496 – wwhitake@bloomu.edu	

A release of discipline waiver form must be filled out and returned to the Dean of Students Office for any disciplinary/judicial information to be released to a requesting party. Upon receipt of this form The Dean of Students Office will forward a student's disciplinary status to the requesting party.

Student Name	BUID	Cell Phone
Current Address	Email Address	

PLEASE SELECT A REASON FOR WAIVER:

- Social clearance
- Academic requirement- list department _____
- Membership in extra-curricular activities- list activity _____
- University employment- List Office and/or position _____
- Other- Explain _____

WAIVER VERIFICATION:

I, _____ hereby authorize my consent for the release of any and all information pertaining to my University Judicial/Disciplinary records on file in The Dean of Students Office for the purpose as indicated above. This information may only be made available and/or requested by those individuals who have supervisory/advising/hiring responsibilities and will remain in effect for the duration of my employment/involvement/relationship with the above listed reason.

Student Print Name	Student Signature	Date
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OFFICE USE ONLY: Date Received _____ By _____ (initials)

Describe Disciplinary Status:

Status sent to: _____ Date Sent: _____