

Application for Fee Waiver

To be submitted to the Building Principal

Student's Name <i>(please print)</i>	Illini West High School School
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As the parent/guardian of the above-named student, I request a waiver of school fees.

I am asking for a waiver of school fees because: *(please check at least one box)*

- ☐ The above-named student (or student's family) is currently receiving aid under Article IV of The Illinois Public Aid Code (Aid to Families with Dependent Children, AFDC) and evidence of participation is enclosed;
- ☐ The above-named student is currently eligible for free meals pursuant to 105 ILCS 125/1 et seq.;
- ☐ While none of the above two statements is true, there are other reasons why I am unable to afford the school fee assessed to the above-named student which are: *(describe in detail)*

Supplying false information to obtain a fee waiver is a Class 4 felony (720 ILCS 5/17-6). I attest that the statements made herein are true and correct.

Parent/Guardian <i>(please print)</i>	Address
Signature	Date

BASED ON BOARD POLICY

DATED: October 10, 2007