

# Student Fee Waiver Request

If the financial condition of your family is such that you do not feel that you can afford to pay student fees, you can apply for a fee waiver.

**TO PROCESS YOUR REQUEST** for a fee waiver, you must submit documentation of your household income. If we do not receive the documentation as required, the request cannot be processed and will be returned to you. Please contact Lori Peterson at 414-525-7613 if you have any questions or concerns.

**Note: Incidental fees, such as lost books, library fines, damaged book fees, etc., will not be waived. The incidental fees must be paid before your fees will be waived.**

If the student fees have been paid in full, the District will not process the fee waiver request for that school year.

## ► Part A

Please  **all that apply**. Types of income you may receive and what you will need to provide.

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Foodshare/W2</b> • Notice of Decision or documentation showing who is receiving the Foodshare benefit and the amount. | <input type="checkbox"/> <b>Unemployment Benefits</b> • Documentation showing that you are currently receiving Unemployment Benefits. |
| <input type="checkbox"/> <b>Alimony</b> • two (2) check stubs or if direct deposit, a copy of the deposits  | <input type="checkbox"/> <b>Social Security</b> • Notice of Decision showing the current amount you are receiving monthly.            |
| <input type="checkbox"/> <b>Child Support</b> • two (2) check stubs or if direct deposit, a copy of the deposits                                  | <input type="checkbox"/> <b>Employment</b> • two (2) most recent pay statements   |

## ► Part B

List **ALL adults living in household**, the relationship to the student, type of income, and the amount of income and how often it is received. Please view example below -

All Adults Living in Household	Relationship	Type of Income	Amount	How Often

## ► Part C

List **ALL children in your household** and the school they are attending. If some of the children are not attending school, please list **NA** (not applicable). It is important that you list **ALL** children in your household.

Name	School	Name	School
1.		5.	
2.		6.	
3.		7.	
4.		8.	

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Primary Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Mail to: James Milzer, Director of Business Services • 8255 West Forest Hill Avenue, Franklin WI 53132**