

Mail this form to:

Office of Admissions 1217 University of Oregon Eugene, OR 97403-1217 **Fax to:** 541-346-5815

E-mail to:

uoadmit@uoregon.edu

APPLICATION FEE WAIVER REQUEST

This form is to be used by freshmen and transfer applicants to the University of Oregon.

To request an application fee waiver:

Name of school/college/agency and address

ro request an application lee waiver.			
•	Check any items below that apply to you Sign and date the student authorization section Provide documentation or authorization by a school, college or, agency official that verifies this information is	correct.	
Full nam	e of applicant (Please Print)	UO ID (if known) or date of birth	
CHECK ANY ITEMS THAT APPLY TO YOU. THEN, READ AND SIGN THE STUDENT AUTHORIZATION.			
 □ I am now eligible for, or participate in, a free or reduced school lunch program. □ I have Pell Grant-eligible status as provided on FAFSA-related documents. (If the FAFSA has not yet been submitted to the UO, have an official at your current college verify and sign below) □ I am now eligible for, or participate in, a TRIO-type college preparatory program (e.g. Upward Bound, Talent, Search, EOP, HEP, etc.) □ I am on State of Oregon or U.S. public assistance. □ I will submit a College Board or ACT fee waiver, NACAC fee waiver, or Foster Youth Tuition and Fee waiver. □ There are other factors illustrating financial hardship, and I will submit that request to the Office of Admissions for review. 			
No applicant will be granted a fee waiver unless they are determined to have genuine financial need. Prospective students who are classified as international applicants are not eligible for an application fee waiver. However, undocumented Oregon high school students who are potentially eligible for the state's Tuition Equity Program can be granted a waiver on a case-by-case basis. The Office of Admissions administers the application fee waiver program. The director of admissions may add, remove, or modify methods of confirmation as needed over time. I request that the University of Oregon waive my admission application fee.			
Student s	signature	Date	
SCHOOL/COLLEGE/AGENCY OFFICIAL SECTION: Your signature below verifies that the above student is eligible for consideration of an application fee waiver based upon the criteria checked above.			
Name of counselor/college official/agency official Jo		Job title	
Signatur	e of school/college/agency official	E-mail address	