

Student section

After completing this section, send this form to your secondary/high school counselor or another school official. If applying via mail, please also provide your school official stamped envelopes addressed to each college.

Student details

Legal name
First/given Middle Last/family/sur (Enter name exactly as it appears on official documents.) Suffix

Date of birth Email CAID (Common App ID)
mm/dd/yyyy

Address
Number and street Apartment number City/town

County State/province Country ZIP/postal code

Current secondary/high school CEEB code

Fee waiver eligibility

You are eligible for application fee waivers if you meet one or more of the following criteria:

- You are enrolled in or eligible to participate in the federal free or reduced price lunch program.
- You have received or are eligible to receive an SAT or ACT fee waiver.
- Your annual family income falls within the income eligibility guidelines set by the USDA Food and Nutrition Service.
- Your family receives public assistance.
- You are enrolled in a federal, state, or local program that aids students from low-income families (e.g., GEAR UP, TRIO such as Upward Bound or others).
- You live in a federally subsidized public housing, a foster home or are homeless.
- You are a ward of the state or an orphan.
- You have received or are eligible to receive a Pell Grant.
- You can provide a supporting statement from a school official, college access counselor, financial aid officer, or community leader.

Do you meet one or more of the Common App fee waiver eligibility criteria?

☐ Yes ☐ No

Signature Date
mm/dd/yyyy

Counselor section

Counselor details

Name
Prefix First/given Middle initial Last/family/sur Suffix

Title Phone Fax
Include country code, number, and extension (if applicable) Include country code, number, and extension (if applicable)

Email

School details

School name CEEB code Website

Address
Number and street City/town

County State/province Country ZIP/postal code

Fee waiver eligibility

This student indicated that they believe they meet the eligibility requirements for a Common App fee waiver. To the best of your knowledge, do you believe the student is eligible for a Common App fee waiver?

☐ Yes ☐ No

You may use this space to provide any additional information in support of this student's fee waiver eligibility.

Signature _____ Date _____
mm/dd/yyyy

Please send this form directly to each college admission office. Do not send this form to Common App.