

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)

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.