APPLICATION FOR WAIVER OF STUDENT INSTRUCTIONAL MATERIALS FEE SCHOOL YEAR: _____

This waiver does not apply to any fees that may be charged for extracurricular activities, fines, school pictures, any breakfast/lunch charges.

	Address: City, State, Zip:	l Guardian:			
	Telephone #: School Attending:			Grade:	
	chool Fee waivers are approved on an annual the student's account. To help us determine				ain
1.	Is student currently on Free Lunch?	Yes	No		
2.	Is student currently on Reduced Lunch?	Yes	No		
**	If the answer is 'No', please complete F&R Lur o', please proceed to following questions:	nch Applic	cation to determ	nine if you NOW qualify. If answer is s	till
3.	Are parent(s) currently employed? income and what is AGI from your 2	Yes 2009 For	No m 1040?)	(If no, what is primary source of	
4.	Do you own your home? Address?	Yes	No		
5.	5. How many dependents in the family? 1 2 3 4 5 6 7 8 9 10				
6.	Have you filed for bankruptcy?	Yes	No		
7.	Why are you requesting a fee waiver?				
	RETURN THIS APPLIC y signature certifies that the above inform ficials may verify this information.				ool
Si	gnature:		Date:		
$\mathbf{A}_{\mathbf{I}}$	pproving Signature:(Building Represe	ntative)	Date:		