



MADISON COLLEGE ADMISSIONS

Program Application Fee Waiver Request Form

A limited number of program application fee waivers are available for qualified applicants and should be requested only if payment of the fee would present a substantial financial hardship to the applicant. Financial hardship will be verified by the Enrollment Center.

Program Application Fee Waiver Requests are for use with program applications only; certificate applications are not eligible.

APPLICANT INFORMATION:

Name: Last _____ First _____ Middle Initial _____

Student ID or Social Security Number _____ Date of Birth (mm/dd/yyyy) _____

Mailing Address _____ City _____ State _____ Zip Code _____

Telephone _____ # of Persons in Household _____

DOCUMENTATION:

Supporting documentation must be submitted with this form. If you are under the age of 25, you must submit a copy of your parent's most recent federal income taxes. Your parent's federal income taxes may impact your residency status at the college.

Documentation showing financial hardship may include one of the following within the last year on school letterhead:

- ACT/SAT Test Fee Waivers Free/Reduced hot lunch

OR, if your financial status is below the federal poverty level guidelines, then one of the following is accepted:

- Federal Income Tax Forms Unemployment Benefits (current) Social Security Benefits

NOTIFICATION:

After processing, this form will be returned to you with a determination. If approved, a waiver code will be supplied for use with the online application. Select the method by which you would like this form returned to you after determination has been made:

- Mail (to the address above) Fax: _____ Madison College Student Email* In Person**

*To receive a waiver decision via email, you must activate your Madison College email account. Waivers will not be sent to non-Madison College email accounts.
 **In person option available only if submitting request in person at the Truax Enrollment Center. This option may not be available at all times.

SIGNATURE & AGREEMENT:

By signing, I certify that I am unable to pay the \$30 application fee, and would like to be considered for a waiver. I understand that documentation of financial hardship must be submitted with this request. I accept the responsibility of not sharing the waiver code with anyone, understanding that if I do share this confidential waiver code, all future fees waived and assessed by Madison College or third party vendors will be my responsibility.

Applicant (or Parent/Guardian if under 18) Signature _____ Date _____

Parent or Guardian Name (If under 18) _____

SUBMISSION INSTRUCTIONS:

Sign and submit completed form and supporting documentation in **one** of the following ways:

- In-person (preferred):** Enrollment Center, Truax Campus, Rm. A1000 or any regional or metro campus
Mail: Enrollment Center, Madison College, 1701 Wright St. Madison, WI 53704

Allow up to two business days for processing of this request. If waiver is granted, this form will be returned to you with a Waiver Code supplied (below*) for use with the online admission application. The code can then be entered on the last page of the online application by clicking on the "Fee Waiver Code" button.

Questions? For further assistance with this form, call the Enrollment Center at (608) 246-6210 or visit in-person.

Regional & Metro Campus Staff - Date stamp, scan and email to intake@madisoncollege.edu.

Enrollment Center Staff - Decision:

Denied - Reason: _____

*** Approved - Waiver Code:** _____

This waiver code is valid for one waiver request only and is intended for use solely by the applicant completing this form.

Staff Name _____ Staff Title _____ Date Processed _____