



## Freshman Application Fee Waiver Request Form

**STUDENT INFORMATION:** *Print or type the information requested below.*

Name (Last, First, Middle Initial): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone #: (     ) \_\_\_\_\_  Home            Work            Cell

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Email: \_\_\_\_\_

High School: \_\_\_\_\_ Semester/year applying for: \_\_\_\_\_

Login ID for online application (if applicable): \_\_\_\_\_

**WAIVER TYPE:** *Please check the box that indicates the basis for your request. Attach official documentation of the waiver you have selected. Without official documentation, your request will not be considered. This form alone does not constitute a request for an application fee waiver. In addition, fee waiver requests are not guaranteed and the Office of Admissions will determine if a request is accepted or denied. If the waiver request is denied, you will be contacted to pay the application fee.*

- Federal Free/Reduced Lunch Program            NACAC Fee Waiver
- College Board SAT Program Fee Waiver        Other (specify) \_\_\_\_\_

**CERTIFICATION:** *Please sign/date and have your counselor sign/date below. I certify that the information provided is complete and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or failure to supply required information may result in rejection of this request and application.*

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit this form along with the required supporting document to the University of Hawai'i at Mānoa's Office of Admissions.**

**University of Hawai'i at Mānoa  
Office of Admissions  
2600 Campus Road, Room 001  
Honolulu, HI 96822**