



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