Senior Citizen Fee Remission Request

University ID Number | Last Name | First Name

Street Address | City | State | Zip

Phone Number | E-mail Address

High School (or GED) Graduation Date (mm/yyyy) | Term Attending IU East

- I affirm that I am an Indiana resident and, at the time of the first day of classes (1) I will be at least 60 years of age; (2) I will be retired, and (3) I will not be employed on a full-time basis.
- I confirm that the information listed on my application is true and accurate.
- I agree to (1) provide the Office of the Bursar with all data necessary to verify my eligibility for this award if so requested, and (2) pay all IU fees that are not covered by the Senior Citizen Fee Remission Program.
- I understand the fee remission is equal to one-half Indiana resident tuition (to a maximum of 9 credits per term) only; all associated mandatory, program, course/class fees will be my responsibility to pay.
- I understand the fee remission is not retroactive and cannot apply to previous terms.
- I understand that a request form must be completed for each term for which I am requesting the fee remission.
- I understand this request must be submitted prior to registering for the term.
- I understand that registration is on a space-available basis and that taking advantage of the senior citizen fee waiver will prohibit me from registering prior to the Friday before classes begin for the term.

Term (ex. Fall 2014)	Course Subject and Number (ex. ENG-W 131)	Class Number	Credit Hours

Student Signature | Date

I elect to discontinue the senior citizen fee waiver in order to take advantage of priority registration. I realize by doing this I am fully responsible for my tuition and fees.

Student Signature | Date

Please return this completed form, along with a copy of your driver's license, to:

Office of the Registrar
Whitewater Hall, Rm. 116
earecord@iue.edu

FOR INTERNAL USE ONLY Date Reviewed:_____ Approved:_____ Denied:_____

Explain denial reason(s) below: