

Application for Fee Waiver School Year 2011-2012

Parent/Guardian Name(s) _____

Home Address _____

Telephone Number _____

Number of People in Household _____

A household is classified as any person(s) within one economic unit residing at the same address.

Please identify all of the children in the areas shown below who will be attending Batavia Public Schools within the 2011-12 School Year. There are areas below to identify fees in which you need assistance to pay for. If it is strictly the required registration fee that you will be paying for, you do not have to include this price if unknown. If you would like to include athletics you will have to identify so we can ensure these fees are waived for you.

Furthermore, if you are approved, the fees being waived only include items that apply to *any* student during the regular school day which includes athletic fees. Examples of extra fees that are not included in a fee waiver would be a yearbook, BHS Senior cap and gown, transportation costs (paid busing and high school parking spots), or any additional miscellaneous costs offered by District 101.

Student Name _____	School Attending _____
Type of Fee _____	Amount of Fee _____
Type of Fee _____	Amount of Fee _____

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Student Name _____	School Attending _____
Type of Fee _____	Amount of Fee _____
Type of Fee _____	Amount of Fee _____

I, the undersigned parent/guardian of the above named student, hereby request that the Board of Education of District 101 waive the above-mentioned school fee pursuant to Board Policy 4:140 and Ill. Rev. Stat. ch.122, para, 10-20, 13.

I further state in support of this waiver request that one of the following statements is true and accurate. **(Please mark at least one choice)**

_____The above named student or student’s family is currently receiving aid/under Article IV of the Illinois Public Aid Code (Aid to Families of Dependent Children AFDC) and **I am enclosing evidence** of participation in AFDC.

_____The above-named student(s) lives in a household that meets the **free lunch** eligibility requirements established by the federal government pursuant to the National School Lunch Act, 42 U.S. C. 1758:7 C.F.R. Part 245. **Two proofs of income are required and will be reviewed.**

_____While neither of the above statements are true and accurate, there are other reasons why I am unable to afford the school fees assessed to the above named student. **I have enclosed the reasons below and also supplied two pieces of documentation to support the request to have fees waived. (Absent documentation, request will not be considered)**

.....
I have reviewed the district’s policy and am specifically aware that supplying false information to obtain a fee waiver is a Class 4 felony (Ill. Rev. Stat. ch. 38, para. 17-6). I attest that the statements made herein are true and correct.

Signature_____

Name of Parent/Guardian_____

Date Application is Submitted _____

.....
Review Denied _____ Payment Plan Offered _____

Review Approved _____

District Personnel

Date

STATEMENT FOR PAYMENT PLAN WILL BE SENT IF DENIED