PALM BEACH STATE

SENIOR CITIZEN TUITION WAIVER

Last Name:		F	First Name:			MI
Student ID:		В	irth Date:			
I am requesting a v	waiver for:					
Fall Spring		Summer	Year			
Name of Courses: List the course number and reference number Course ID Reference Number Credit Hours						
					I	

I, the undersigned, acknowledge the following:

- A 75% discount will be given for courses that are waived.
- All other charges/fees are my responsibility (including, but not limited to books, lab equipment, etc.)
- My ability to secure the courses I request depends on space availability as defined by the institution.
- No academic credit will be received for courses in which a waiver is granted.

Signature (Student)

Date

FOR PALM BEACH STATE COLLEGE INTERNAL USE ONLY						
Registrar's Office:		<u>Cashier's Office:</u>				
Signature (Desistration Dan)	Data	Customer Number: 28 Contract:				
Signature (Registration Rep.)	Date	Receipt Number:				
Registration Rep. Name (Printed)					