

Semester:		Year:		Completed waiver	
Name:				applications and payment	
	SSN (last 4 digits): Rhode Island College Bursars Office, Bldg 4 600 Mount Pleasant Ave Providence, RI 02908 OR: Bursar@ric.edu				
 Tuition may be waived for Disabled American Veterans under the following conditions: The student must be a resident of the State of Rhode Island and eligible to be assessed instate tuition rates in accordance with the Residency Policy established by the RI Board of Governors for Higher Education. Please attach a copy of a Rhode Island State Issued ID or Driver's License. The student must present recently dated evidence of Veteran status with a minimum 10% disability. Please attach supporting documentation. Matriculated students must have a verified Free Application for Student Aid (FAFSA) on file for the current academic year. Please apply online at https://studentaid.gov. The waiver will be reduced by the amount of any grant or scholarship awards received. Waiver applications will be returned or denied if the FAFSA is not completed. The student must remit payment for required fees, or demonstrate sufficient financial aid assistance, at the time that this waiver is presented. NOTE: Tuition waiver requests will not be processes if forms are incomplete, documentation is missing, or if payment for required fees is not presented. Waivers cannot be used for non-credit courses, program fees, or audit fees. 					
I declare that the above information is true and correct to the best of my knowledge.					
Signature:			Date:		
For Office	e Use Only:		NOTES:		
Applied fo	or Financial Aid:Ye	sNo			
Matriculat	ing Student:Ye	esNo			
Waiver A	pproval:Ye	No			