TUITION AND SELECTED FEES WAIVER APPLICATION

The Board of Trustees (BOT) Tuition and Selected Fees Waivers are awarded through the Graduate College and the College of Education. A BOT waiver waives all tuition, the service fee, the health service fee, and provides $100 per year toward Campus Care health insurance. All other fees (the remainder of Campus Care health insurance, the general fee, and the CTA fee) are the student's responsibility. Students can apply for either full-time or part-time waivers.

Waivers are given only a single term at a time, and repeat waivers, although not prohibited, are unlikely (and waivers are never given more than twice). Waivers are not an entitlement, but an award from the university; submission of an application does not ensure that a student will be selected to receive a waiver. There are always fewer waivers available than there are applicants, so it is important that applications include all information requested. Contact your department for more specific information about their priorities.

DEADLINES FOR SUBMISSION OF ALL APPLICATION MATERIALS

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<th>SEMESTER</th>
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<td>SUMMER SEMESTER</td>
<td>MARCH 1</td>
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<td>FALL SEMESTER</td>
<td>JUNE 1</td>
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<td>SPRING SEMESTER</td>
<td>NOVEMBER 1</td>
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All application materials must be complete and submitted by the application deadline. This application is only for the term indicated. You must submit a new application for each term you wish to be considered.

ELIGIBILITY REQUIREMENTS
1. Be a graduate student enrolled in or admitted to a degree program in the College of Education.
2. Be in good standing.
3. For Full-time Waivers:
   - Be enrolled for a minimum of 12 hours for Fall and Spring semesters (6 hours for Summer term)
4. Be employed no more than 20 hours per week within or outside the university for full-time waivers.

For Part-time Waivers:
- Be enrolled for 8–11 hours for Fall and Spring semesters, and 3–5 hours for Summer term

REQUIRED DOCUMENTS
1. The College of Education Graduate Program Information Sheet (1 page.)
2. Two letters of recommendation written within the last twelve months. For current students letters from faculty who can attest to the quality of your academic record and standing in the graduate program and the relevance of your work to the College mission are required. Collect your letters and submit them with your application. Prospective students do not need to collect letters of recommendation (we will use the letters submitted in support of your application).
3. Current UIC students should submit their current UIC transcript (unofficial transcripts printed from my.uic are acceptable). Prospective students do not need to submit transcripts, your transcripts in your application packet will be reviewed.
4. Document supporting the reason for your application in 250 words or less.

Submit all application materials in one complete package by the appropriate deadline date to:

Office of Student Services
College of Education
1040 W. Harrison St.
Room 3145 m/c 147
Chicago, IL 60607
(312) 996-4532

Updated 5/24/2017
COLLEGE OF EDUCATION
GRADUATE PROGRAM INFORMATION SHEET

Name: ___________________________________________ UIN# _______________

Address: _________________________________________ Email: _______________@ ___________

Home Phone: ______________________ Work Phone: ______________________

If your contact information changes, please inform us immediately by stopping in OSS (room 3145) or calling (312) 996-4532. If you cannot be contacted, you may lose your chance for a waiver.

I am applying for the following term (Choose only one)

☐ Summer 20 _____  ☐ Fall 20 _____  ☐ Spring 20 _____

Please check whether you are applying for a full-time (12 hours or more) or part-time (8-11 hours) waiver.

☐ I am applying for a Full-time Waiver  ☐ I am applying for a Part-time Waiver
(To be eligible for a full-time waiver you can only be employed up to 20 hours per week)

Degree Sought:  ☐ M.Ed.  ☐ Ph.D.  Term you began your program:
________________________

Program of Study: __________________________________________________________

Is this waiver request for the term that you will be student teaching?  ☐ Yes  ☐ No

Is this waiver request for a term that you will be collecting research data for dissertation/thesis?
☐Yes  ☐ No

Have you previously received a tuition waiver?  ☐Yes  ☐ No

If yes, what terms: __________________________________________________________

Your request will be reviewed based on one or all of the following criteria: Academics, Diversity and/or Financial Need. In 250 words or less, please describe which of these criteria would support your application.

Persons from whom you have requested letters of recommendation to attest to your academic record. Letters must have been written within 12 months from the date of your application.

1. _______________________________  2. _____________________________

If I am a recipient, I agree to enroll in the appropriate amount of credit hours for the waiver I have been offered.

Signature: _______________________________ Date: ______________