

Request for Fee Waiver Application Form

(SEND THIS FORM DIRECTLY TO YOUR CAMPUS ENGAGEMENT & SUPPORT COORDINATOR)

(For Parents/Guardians)

Waiver of School Extracurricular Activities Fees

The Harmony Public Schools will waive extracurricular activity club membership fees if the students has received to participate in the Federal Free or Reduced Price Lunch Program. Student club membership fees will also be waived if the family experiences a very significant loss of income because of severe illness or injury in the family. **Fee** waivers will be considered only if written evidence is presented by the person applying for the waiver. Fees do not include: charges for optional travel undertaken by a school club or group of students outside of school hours; charges for admission to school dances, athletic events, or other social events; optional community service programs for which fees are charged; and voluntary summer camps or programs.

Application for Waiver of School Extracurricular Activities

Fees

An application form for school fee waiver is available in the principal's office or can be downloaded using the school website. The completed form should be submitted to the campus engagement & support coordinator or designee. One application form should be submitted at the beginning of each school year to determine the eligibility for the waiver of all applicable fees for that school year. No fee shall be collected from any parents/guardians who are seeking a fee waiver in accordance with this policy until they have been notified of the district's decision regarding the request or appeal, if one is made. The principal/coordinator or designee will notify the parents/guardians within 30 days of receipt of the request, as to whether the request has been granted or denied. If the request is denied, or a subsequent decrease in family income occurs, you may reapply for a waiver at any time during the school year. Questions concerning the fee waiver process should be addressed to the principal's /campus engagement & support coordinator's office.



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Dear STUDENTS and PARENTS;

HELP is available if you cannot afford to pay school extracurricular activities fees. If you are eligible based on income verification, you probably qualify for fee waivers (meaning that you will not be required to pay the fees). You may also be eligible for fee waivers if your family is having serious financial difficulties. If fee waivers are sought for activities where students are required to participate in fundraisers, all students will be expected to participate in group fund-raisers to the same extent for fees to be waived. If you are required to apply for fee waivers by your school district, you will be asked, consistent with local board policies and/or guidelines and school district timelines, to provide documentation of your fee waiver eligibility. If you qualify, ALL fees must be waived, including required field trips fees, student club fees for registration, extracurricular activities, team summer camps, etc.

It is the intention of the Harmony Public Schools that <u>no student is denied participation</u> in school-sponsored activities and bus transportation due to inability to pay. Waivers are based on income and family size as well as special circumstances or temporary hardships. Applications for financial assistance are confidential.

Application Date:	Campus Name: Home Phone:	
Parent/Guardian Name:		
Relationship:	Work Phone:	
Home Address:		
Student Name:	ID#:	Grade/Section:

I, the parent/guardian of the above listed student(s) hereby request that the Harmony Public Schools Houston South District waive the school fee(s). I further state in support of this waiver request that the following is true and accurate. Income, financial assistance and child support must be shown, if applicable. Please provide the following forms for all wage earners in your household.



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The forms below may also be considered if applicable. Attac	in copies of appropria	ue torms.	
Verification of Medicaid EligibilityVerification of Fos	ster Child Status		
Proof of UnemploymentProof if on DisabilityMise	cellaneous Proof of Inc	come	
Number of Members in Household must equal number of members	pers listed on Form 104	10 or equivalent	
Names (List everyone in household)	Relationship	Age	
1.			
2.			
3.			
4.			
5.			
6.			
Special Circumstances: My family has experienced a significant loss of income due to severe illness, injury to a member of the family or other. Please explain circumstance or loss attaching documentation, such as doctor's notes, accident report, etc.			
Parent/Guardian Signature	Date		



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FOR	SCHOOL USE ONLY
Application Completed Date:	Gross Income Total:
Prior Years Unpaid Fee Amounts:	
Арр	oroval □ Yes □ No
no item is checked, the request will be den Student has received or is eligible	eet at least one of the following indicators of economic need. If ied. to receive an ACT or SAT testing fee waiver. participate in the Federal Free or Reduced Price Lunch
CERTIFICATION STATEMENT:	
I certify that the student named on this form meets the indicator(s) of economic need ch	m is currently enrolled in grade at this school and necked below.
Authorized School Official's Name:	
Authorized School Official's Signature:	
Authorized School Official's Title:	Date: