

Valdosta State University Office of Testing

REQUEST FOR FEE WAIVER

1) I would like to request a fee waiver for the following administrative fee(s) at Valdosta State University's Office of Testing:

- Accuplacer Retest (\$10) Distance Learning / ISE Admin Fee (\$25)
 CLEP Admin Fee (\$25) eCore Admin Fee (\$25)

2) I am requesting this fee waiver for the following reason(s):

- I have been receiving financial assistance based on need as an undergraduate student and I am unable to pay the required administrative fee(s).
 My present financial situation makes it impossible for me to pay the administrative fee(s).
 I am an active member of the United States Armed Forces.

**A letter stating reasons necessitating request for a waiver must be returned with this form. Submission of the Request for Fee Wavier form and letter does not guarantee /'mthat a fee waiver will be granted.
Only two (2) fee waivers will be granted to an examinee per semester.**

Semester of Application: Fall 20____ Spring 20____ Summer 20____

Applicant Name (Please print)

Signature

Date

Email Address

Send both this form and the letter by mail or email:

Valdosta State University
Attn: Rebecca Taylor, Director of Testing
1500 N Patterson Street
Valdosta, GA 31698

rtaylor@valdosta.edu