

STUDENT FEE WAIVER FORM 2017-2018

Bettendorf Community School District

PLEASE COMPLETE ALL INFORMATION ON THIS FORM TO HAVE FEES ADJUSTED. RETURN COMPLETED AND SIGNED FEE WAIVER FORM TO THE BCSD DISTRICT ADMINISTRATION CENTER TO BE PROCESSED. PLEASE COMPLETE ONLY ONE FEE WAIVER PER FAMILY.

If your child qualifies for free or reduced price meals, you may also be eligible for other benefits. One of these benefits is school fees. If you sign this waiver, your child will be **considered** for a full, partial or temporary waiver of textbook rental, transportation and/or musical instrument fees. **This waiver does not carry over from year to year and must be completed annually.**

Please print clearly.

Date Completed: _____

Name of parent, guardian, or legal/actual custodian

Street Address

City, State, Zip

Student Name

School

Grade

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Allow my child(ren)'s name and meal eligibility **to be shared with staff to adjust Textbook Rental Fee.**

Yes No

Allow my child(ren)'s name and meal eligibility **to be shared with staff to adjust Transportation Fee**

Yes No

Allow my child(ren)'s name and meal eligibility **to be shared with staff to adjust Musical Instrument Rental.**

Yes No

Your signature below is **REQUIRED** for the release of information regarding the student or the student's family financial eligibility. Without your signature, this application cannot be processed.

I understand that I will be releasing information that will show that I applied for free and reduced price school meals for my child. I give up my rights to confidentiality for waiver of school fees **ONLY**.

→ _____
Signature of parent, guardian or legal/actual custodian

Date

For Office Use Only:

Date Approved: _____

Full _____

Partial _____

Temporary Approval _____ **Expires:** _____ **Mo.** _____ **Day**

6-14-2017