

Request for Admission Application Fee Waiver

TO: Office of Admissions, University of Arkansas at Pine Bluff, Mail Slot 4892, 1200 N. University Drive, Pine Bluff, AR 71601 or fax it to UAPB Admissions Office at 870-575-4607

STUDENT: Print or type the information requested below. You must personally sign the Certificate Statement. **CERTIFICATE STATEMENT:** I certify that I understand and meet all eligibility requirements to request an admission application fee waiver. STUDENT'S NAME STUDENT'S SIGNATURE STUDENT'S ADDRESS CITY **STATE** ZIP PHONE NUMBER **EMAIL ADDRESS** AUTHORIZED OFFICIAL: Print or type the information requested below and check the indicator(s) of eligibility. You must personally sign the Certificate Statement. **CERTIFICATION STATEMENT:** I certify that the student named on this form is currently enrolled in the 11th or 12th grade at this school and meets the eligibility for waiver as checked below. **AUTHORIZED OFFICIAL'S NAME AUTHORIZED OFFICIAL'S SIGNATURE AUTHORIZED OFFICIAL'S TITLE** AUTHORIZED OFFICIAL'S EMAIL NAME OF SECONDARY EDUCATIONAL INSTITUION OR ORGANIZATION CEEB OR PROGRAM" **ADDRESS** PHONE WAIVER CRITERIA: Check all that apply. Student is enrolled in a federal, state or local government funded program that aides students from low income families (e.g., Upward Bound). Student claims Legacy Status. A student may claim Legacy Status as a child or grandchild (age 26 or under) of a UAPB/AM&N graduate who is a current annual dues paying member or a Life Member of the UAPB/AM&N National Alumni Association. Student must provide the full first and last name of the parent or grandparent as it appears on the UAPB/AM&N National Alumni roster. Send this form to the Association at alumniuapb@aol.com for verification of Legacy Status. Alumni Parent/Grandparent Full First and Last Name