SENIOR CITIZEN TUITION WAIVER REQUEST

NAME: Last, First, Middle Initial	WSU ID NUMBER	TERM: 20___ Fall Spring

Address	Email Address	**CAMPUS LOCATION** ____ **Pullman** ____ **Spokane** ____ **Tri-Cities** ____ **Vancouver** ____ **Global**

City	State	Zip Code	Daytime Phone #	

COURSE REQUESTS – Indicate courses below to request enrollment as **AUDIT**

Course Subject/ Course Number *(eg: ANTH 101)*	Sec. No. *(eg: 01)*	Class zzusis No. *(eg: 2061)*	Lab zzusis No. *(eg: 2062)*	Credit hours *(must enter if variable)*	Instructor Signature Required	Enrollment in Full Class Department Chair Signature	Department Consent Required Departmental Signature

Eligibility Certification – Enrollees under this WSU Tuition Waiver for Persons Age 60 and over are registered on a space available basis and as Audit only. As a condition of this waiver under the provisions of RCW 28B.15.540, I hereby certify that I am 60 years or older and a resident of the state of Washington. I further certify that I do not plan to use the course(s) taken through such enrollment toward credentials, degrees, or for salary increases.

Signature of Senior Citizen _____ **Date** _____

Enrollment Limit – Enrollment under this waiver is limited to six (6) credits and a maximum of two (2) courses; may be taken fall and spring semesters only.

Admission – Senior citizens using this Tuition Waiver will be admitted at the Registrar's Office at the same time they are enrolled.

Course Exceptions – Senior citizens may not enroll in internships, 100% online classes without any on-campus component, courses numbered 499, 600, 700, 702 and 800 and self supporting courses (including all summer session courses) under this waiver.

Charges – Senior citizens enrolled with this waiver pay a $5.00 non-refundable administrative fee plus any special course fees, and /or laboratory fees. Fees must be paid by the second Friday of classes to avoid late payment fees.

For Registrar Office Personnel Use:

__ Verified DOB & RES	__ Quick Admit	__ Enroll in Quick Enroll	**Verified by Registrar's Office**	Waiver Code Entered	Date
				_____	

Revised Aug 14