

UC Santa Barbara Graduate Division – Graduate Application Fee Waiver Request Form

A limited number of application fee waivers are available to qualified applicants (U.S. citizens and permanent residents only). This fee waiver request form must be sent after you have completed and *submitted* an online application. **To submit your online application, please select the check or money order payment option, and then send in this form rather than sending monies.** This form must also be accompanied by proof of either (1) participation in a designated undergraduate research program or (2) documented proof of financial need (check one of the options below). Failure to include appropriate documentation with your request will delay the processing of your application. Please mail or fax the required documents with this form to the UC Santa Barbara Graduate Division, Attn: Graduate Admissions, 3117 Cheadle Hall, Santa Barbara, CA 93106-2070, Fax: (805) 893-8259. Your complete Fee Waiver Request form and corresponding documentation **must be received by the Graduate Division two weeks prior to the application deadline for the department to which you are applying.** Fee waiver requests received after the deadline will not be considered. **To determine whether your fee waiver request is approved, please check your Application Status Page www.graddiv.ucsb.edu/eapp.**

Applicant Information

Name: _____
Legal Family Name (surname) First Name Middle name

Six-digit Electronic Application ID# _____ Email Address: _____

Telephone: (_____) _____ Date of Birth: _____ / _____ / _____
Month Day Year

Department to Which You Are Applying: _____

Fee Waiver Option 1: Program Participation

If you are affiliated with any of the below research programs, please select the program and attach a signed letter of verification from your program director.

- | | |
|--|---|
| <input type="checkbox"/> ARC (Academic Research Consortium) | <input type="checkbox"/> MESA (Mathematics, Engineering, Science Achievement) |
| <input type="checkbox"/> CAMP (California Alliance for Minority Participation) | <input type="checkbox"/> MARC (Minority Access to Research Careers) |
| <input type="checkbox"/> CSU Pre-Doctoral Program | <input type="checkbox"/> NSF AGEPE (Alliance for Graduate Education & Professoriate) |
| <input type="checkbox"/> GRIP (Graduate Research Internship Program) | <input type="checkbox"/> Project 1000 |
| <input type="checkbox"/> ICB Diversity Program (Institute for Collaborative Biotechnologies) | <input type="checkbox"/> UC DIGSSS (Diversity Initiative for Graduate Study in the Social Sciences) |
| <input type="checkbox"/> Louis Stokes Bridges to the Doctorate Program | <input type="checkbox"/> UC LEADS (Leadership Excellence through Advanced Degrees) |
| <input type="checkbox"/> MBRS (Minority Biomedical Research Support Program) | |
| <input type="checkbox"/> McNair Scholars Program | <input type="checkbox"/> Other _____ |

Fee Waiver Option 2: Financial Aid

Students who have received significant financial aid from their current university may be eligible for a fee waiver. Acceptable documentation includes (1) a signed letter from a financial aid officer stating your Estimated Student or Family Contribution (EFC), or (2) an official financial aid award letter for the current year. A copy of a university Student Aid Report (SAR) will not be accepted.

- Financial Aid Documentation Attached

Fee Waiver Option 3: Household Income

Household size is determined by the number of people you report or claim on your income tax forms for the previous year. If you are claimed as a dependent, your household size is determined by the total number of people claimed on that tax form. A copy of this form must be submitted for verification of eligibility. If you are independent and have no earned income, you must document how you supported yourself for the past year and why you do not have sufficient funds to pay the application fee.

- Household Income – Tax Documents Attached

Applicant Family Size	Gross Income
1	15,600
2	21,000
3	26,400
4	31,800
5 or more	37,200

Signature: I understand that my request for an application fee waiver will be approved **or** denied based upon the information I have provided. The information I have provided is true and complete.

Name (print): _____

Signature: _____ Date: _____

UCSB GRADUATE DIVISION USE ONLY

Approved **Denied** Authorizing Signature: _____ Date: _____