

## FEE WAIVER REQUEST FORM

Families who feel they may qualify for the Free & Reduced Lunch Program, based on family income, have the option to complete the school district's Fee Waiver Request Form. Free & Reduced lunch status is separate from Fee Waiver eligibility. Free & Reduced lunch status is only one criteria used to determine the appropriateness of a Fee Waiver Request. All requests are kept confidential. Return the completed Fee Waiver Request Form, along with your application for the Free & Reduced Lunch Program to one of the school offices or the District Office. Upon receipt of completed Free & Reduced Lunch Application and Fee Waiver Request Form, written notification will be mailed to families of approval.

**Did you complete a Free/Reduced Lunch Program Application?**             **Yes**             **No**

Child's Name	Grade	Child's Name	Grade
1)		4)	
2)		5)	
3)		6)	

**IMPORTANT:** By signing this form you are giving permission for school officials to share information related to your completed Free and Reduced Price School Meals Application. If necessary, this information would be shared only with the principal and/or office staff of the school your child is currently attending in the Howards Grove School District. Information shared would not include specific financial information, but would include qualifying status information only for the purpose of the school district's Fee Waiver Request option.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

For questions or additional information, contact Chris Peterson, Superintendent at (920) 565-4454, or e-mail at [cpeterson@hgsd.k12.wi.us](mailto:cpeterson@hgsd.k12.wi.us).

**Return completed Fee Waiver Request Form to: 403 Audubon Road, Howards Grove, WI 53083.**  
**It is important to note that any fee that has been paid will not be reimbursed if a family should qualify for Free and Reduced Lunch after fees have been paid.**

**Do Not Write Below This Line - For District Office Use Only:**

<b>Fee Waiver Request Approved:</b>	_____ <b>Yes</b>	_____ <b>No</b>
_____	_____	_____
<b>Signature of Superintendent</b>	<b>Date</b>	
<b>Reason Fee Waiver is <u>not</u> approved:</b>		
_____		
<b>Parent/Guardian Notified</b> _____	<b>Date</b> _____	<b>Initials</b> _____

**This institution is an equal opportunity provider**