

# Davidson Fine Arts Magnet School

## 2017-2018 Fee Waiver Eligibility

Dear Parents and Guardians,

Fee waivers are resources provided by College Board and ACT that exempt students from paying registration associated with the SAT and ACT. Students may receive a lifetime maximum of two (2) fee waivers per test for the SAT and ACT for a total of four (4) waivers.

In the past, students who qualified for free and reduced lunch were also eligible to receive fee waivers. However, due to changes in Richmond County's Free and Reduced Lunch program, the school counseling office will need to verify students' eligibility for fee waivers each school year.

Please see the guidelines below and check the box that best identifies your student. This form must accompany documentation for verification at least one week prior to SAT and ACT regular registration deadlines. Any form that is not submitted by the deadline will not be considered for fee reductions.

If a student fails to take the test for which they registered using a fee waiver, the student forfeits his/her right to another waiver.

Thank you,

*Mrs. Bobbie Lou Shipman*  
High School Counselor

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### Davidson Fine Arts Fee Waiver Requirements

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Please select one and provide documentation (ex: Federal 1040 form)

- ☐ Enrolled in a program for the economically disadvantaged (ie: Upward Bound, Gear Up).
- ☐ Resides in a foster home, is a ward of the state or is homeless.
- ☐ Family receives low-income public assistance or lives in a federally subsidized public housing.
- ☐ Family's total income last year is at or below the USDA levels listed in the chart below.

# in household (including student)	Total annual income before taxes (in last calendar year)
1	\$22,311
2	\$30,044
3	\$37,777
4	\$45,510
5	\$53,243
6	\$60,976
Each additional	Plus \$7,733 each

Parent Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

I acknowledge I have read and understand the information pertaining to fee waivers.

Parent Signature: \_\_\_\_\_

**To be completed by Counseling Staff:**

Documentation provided \_\_\_\_\_ on \_\_\_\_\_ (date)

Eligible for Fee Waiver? Yes    No                      SAT / ACT                      Fee Waiver #: \_\_\_\_\_

I acknowledge receipt of fee waiver \_\_\_\_\_ Date Received: \_\_\_\_\_  
student signature)