

APPLICATION FOR SENIOR CITIZEN FEE WAIVER

NAME: _____

ADDRESS: _____

CONFIRMATION DOCUMENT: _____

DRIVERS LICENSE #: _____ BIRTHDATE: _____

CLASSES DESIRED: _____ QUARTER: _____

LINE #	DEPT.	COURSE #	SECTION	CREDITS	M T W TH F	ROOM

PURPOSE OF ENROLLMENT: _____

I certify that I am not taking the above classes for credential or salary purposes.

Student Signature

Tuition of \$5.00 plus fees will be charged for this registration.

Date: _____ Enrollment Authorization: _____
Dean of Enrollment Services

RCW 28B.15.540

**Waiver of tuition and fees for residents sixty years of age or older -
Limitations.**

Senior Citizens Audit: People 60 years of age or older, who have lived in Washington State for 12 months or longer, may enroll in a maximum of two classes for a \$5.00 tuition fee where there is space available on the first day of the class. Classes are subject to a \$5.00 per credit technology use fee and a \$1.50 student elective fee per credit. Self-supported classes or classes with special fees are not included in this category. Not for students intending to use credits for increasing credentials or salary increases.