



Application for Waiver of Fees 2011-2012

OFFICE USE ONLY
<input type="checkbox"/> Verified
<input type="checkbox"/> PS

PLEASE READ PRIOR TO FILLING OUT FORM:

- 1) Waiver covers the following: Instructional Materials Fees, Course Fees and Textbook Rentals
- 2) Waiver does NOT cover: Transportation Costs; Lunch fees in excess of \$10.00 per child; or Library Fines
- 3) Incomplete forms or forms without supporting documents **will be returned.**
- 4) Waivers will not be approved if any students in the family have outstanding fees from previous years. All school property must be returned or fees must be paid for before the fee waiver will be considered.
- 5) Any School Fees that you have paid will be refunded at your request to the school upon approval of this waiver form.
- 6) Complete Section A and Either B or C and forward to the school or the address indicated on the back of this form.

SECTION A: PARENT/GUARDIAN			
Last Name	First Name		
Street Address	City	State	Postal Code
Home Telephone No	Cell Telephone No.		
Number of people residing in household: No. of adults _____ No. of children _____			
Name of Student(s)		Grade	

SECTION B: CONFIDENTIAL FINANCIAL INFORMATION Please choose from ONE of the options below. Use Section C if choosing neither option.

- I have attached a copy of my **Previous YEAR Tax Return** for **ALL** adults in the household.
- I have attached a copy of a current letter from Health and Welfare stating I am currently receiving benefits and am being advised/reviewed by the department.

SECTION C: EXCEPTIONAL CIRCUMSTANCES (more information on the back)

- My circumstances are exceptional and I have provided the necessary documents.
(Please read on back of this form on how to apply for exceptional circumstances.)

I certify the information provided on this application and in any documents attached is correct and complete. I also understand financial and other information provided above is confidential.

Signature Date

Principal's signature for exceptional circumstances only

EXCEPTIONAL CIRCUMSTANCES

Check **Section C** on front if there are exceptional circumstances that are impacting your ability to pay your fee(s). In order to be considered for exceptional circumstances all 4 of the following criteria must be met:

- 1) Provide a letter detailing your circumstances
- 2) Attach supporting documents such as the following:
 - Photocopies of your current reporting card and check stub for Employment Insurance Benefits (name and amount received must be visible)
 - Letter from your present employer stating your current gross income
 - Letter from school/university you are attending full time or a photocopy of your student loan
 - A current statement from Social Services certifying that the applicant is on social assistance and the student(s) is/are dependent(s) of the applicant
 - Resettlement assistance program documents
- 3) Waiver must also be signed by Principal of your child(ren)'s school(s)
- 4) Final decision rests with the Business Manager for Xavier Charter School.

The following chart of family income levels outlines how the waiver of fees will be determined for the school year.

<u># of Adults and Children Per Household</u>	<u>100% Waiver</u>	<u>50% Waiver</u>
1 person	<\$19,078	\$19,078 - \$25,437
2 persons	<\$23,750	\$23,750 - \$30,109
3 persons	<\$29,197	\$29,197 - \$35,556
4 persons	<\$35,450	\$35,450 - \$41,809
5 persons	<\$40,207	\$40,207 - \$46,566
6 persons	<\$45,347	\$45,347 - \$51,706
7 or more persons	<\$50,487	\$50,487 - \$56,847

Sign and mail the completed application form with supporting document(s) to:

Xavier Charter School
Business Manager
1218 N College Rd W
Twin Falls, ID 83301

Mark "CONFIDENTIAL" on the envelope
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You will be notified of our decision in approximately 3 weeks. If your application is not approved it will be returned to you with a letter of explanation. Please keep and resubmit this application when you have the required documents prior to the deadline.