



FEE WAIVER REQUEST FORM MCNAIR SCHOLARS

First Name:	MI:	Last Name:
CSDCAS ID #:		
Address:		
City:	State:	Zip Code:
Phone:	Cell	Home Work
Email:		

I am requesting a fee waiver for my CSDCAS application and I understand the following terms:

- CSDCAS must receive and process my fee waiver request before I submit my application.
- This fee waiver is only available to current McNair Scholars who are in good standing.
- Fee waivers are awarded on a first-come, first-served basis. There are a limited number of fee waivers available.
- If awarded, this fee waiver covers only the initial application fee (\$139).

MCNAIR PROGRAM COORDINATOR

I certify that the individual identified above is a current McNair Scholar in good standing and therefore eligible for a CSDCAS fee waiver of one designation.

Name, Institution, and Title:

Signature:

Date:

I am a McNair Scholar: Yes No

I read the [Fee Waiver instructions](#) and understand the fee waiver process. Additionally, I understand that my fee waiver request is not considered complete until the McNair Program Coordinator signs this form.

Signature:

Date:

→ Be sure to save a copy of this form on your computer first before completing it. Then, after you complete it and your McNair Program Coordinator signs it, upload the new file in your CSDCAS application under Fee Assistance Program.

All fee waivers expire after 14 days.