

FEE WAIVER REQUEST FORM TEACH FOR AMERICA MEMBERS

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

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

- VMCAS must receive and process my fee waiver request before I submit my application.
- This fee waiver is only available to active Teach for America Members (i.e., not alumni).
- 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 (\$234).

TEACH FOR AMERICA SUPERVISOR	
I certify that the individual identified above is an active Teach for America member with my organization and therefore eligible for a VMCAS fee waiver of one designation.	
Name, Institution, and Title:	
Signature:	Date:

I am an active Teach for America member: 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 Teach for America Supervisor signs this form.
Signature:	Date:

➔ Upload a completed and signed form in your VMCAS application under Fee Assistance Program.
All fee waivers expire after 21 days.