

Holyoke Community College
Application for Massachusetts Categorical Tuition Waiver

Student Information

Name: _____ Student ID#: _____

Street: _____

City: _____ State: _____ Zip: _____

Period of Enrollment (semester): _____

I wish to be considered for the Commonwealth of Massachusetts Categorical Tuition Waiver for:

- Massachusetts Rehabilitation Commission
- Massachusetts Commission for the Blind
- Native American Tuition Waiver

Eligibility Certification

- ❖ I certify I am a United States citizen or eligible non-citizen.
- ❖ I certify I have been a lawful Massachusetts resident for at least one year prior to the beginning of the academic year (first day of courses for the fall semester).
- ❖ I certify I am **not** in default of any federal or state loan(s), or owe a refund on any financial aid previously received.
- ❖ I certify I am in compliance with applicable Selective Service Registration laws. (males only)
- ❖ I certify I have filed a Free Application for Federal Student Aid (FAFSA) for the academic year (if you're applying for need based aid).

In accordance with the Institutional Requirements you must:

- ❖ Present documentation of Categorical Tuition Waiver
- ❖ Be enrolled in at least three credits per semester in a state supported undergraduate degree, or certificate program.
- ❖ Maintain satisfactory academic progress in accordance with federal and institutional standards.

Statement of Understanding and Acceptance

By signing below, I acknowledge I have read and fully understand all eligibility certification and program requirements noted above. I also understand if I do not meet all the requirements above, I will be held liable for payment of all applicable charges.

Student Signature: _____ Date: _____