SENIOR CITIZEN TUITION WAIVER APPLICATION

Name	E			
Address				
(Street)	(City)			
	Please attach	n a copy of our c	lriver's license or	r State of Illinois ID
card.				
Household Income for tax year Please attaché a signed copy of yo			\$	
Untaxed Income, i.e., social secur			\$	
	, 1			
In accordance with the provisions following requirements: 1. Age 65 or over	of Senior Citizen Course	e Act (110 ILCS	990), a student r	must meet the
 Illinois Resident Annual household inco Admitted to Eastern III 		the federal pove	erty level	
Certification This application is for the Senior (and/or Summer	Citizen Tuition Waiver fo	or Fall S	Spring	
I understand that a separate applic waiver will pay tuition only for cl with these classes.	<u>-</u>			
All of the information reported on	this form is true and cor	nplete to the bes	st of my knowled	ge.
Signature	Office Use		Date	
	Office Osc	. Omy		
Approved for academic year	Fall Spring Su	mmer		
Denied for academic year	Reason		-	
Office of Financial Aid S	 Signature	Date		

Complete and sign this form, then submit it to our office: In person (Student Services Building East Wing) OR Via email at finaid@eiu.edu OR By fax at 217-581-6422



EASTERN ILLINOIS UNIVERSITY OFFICE OF FINANCIAL AID AND SCHOLARSHIPS 600 LINCOLN AVENUE, CHARLESTON, IL 61920

TELEPHONE: 217-581-6405 FAX: 217-581-6422 EMAIL: finaid@eiu.edu