

For office use only	
Approved <input type="checkbox"/>	Denied <input type="checkbox"/>
Date _____	By _____

Application Fee Waiver 2009 - 2010

Please Print:	
Name _____	Social Security Number _____ - _____ - _____
Address _____ Apartment # _____	
City _____	State _____ Zip Code _____
Telephone Number (_____) _____ - _____	Email Address _____

Complete ONE of the following sections: A, B, or C. Incomplete applications will be automatically denied.

Section A (To be completed by financial aid counselor.)	
Recipient of financial aid for the academic year of 2009-2010 Yes <input type="checkbox"/> No <input type="checkbox"/>	
By Federal guidelines, is he/she independent? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Grants: _____	Amount _____
Loans: _____	Amount _____
Other: _____	Amount _____
_____	_____
Financial Aid Counselor Signature	Date
(Official stamp or seal required)	

Section B (Applicant's estimated financial information.)	
Total size of your household in 2009	_____
Applicant's (and if married spouse's) estimated total 2009 income.	\$ _____
If dependent, give parents 2009 total income	\$ _____
Are you currently receiving welfare assistance?	_____
a) If yes, please give monthly amount	\$ _____
Are you receiving unemployment benefits?	_____
a) If yes, please give monthly amount	\$ _____

Section C (Please complete this section *only* if Section A or B does not apply to you, attach supporting documentation.)

I hereby certify that I am not receiving financial aid as a student, nor am I receiving unemployment or welfare assistance. Furthermore, I am requesting a fee waiver for the following reason:

I certify that all information contained in this fee waiver form is accurate and true. I understand that any false or misleading statements may disqualify me from consideration. I also understand that incomplete responses will delay the process and may be reason for ineligibility.

Applicant Signature

Date

Please complete this page, include appropriate documentation and mail to: Office of Admissions, Loyola Law School, 919 Albany Street, Los Angeles, CA 90015-1211 or fax form and documentation to 213-736-6523.