Application Fee Waiver

Date __________________________  Students Name __________________________

Fee Waived Based upon:

_____ Student is Eligible for Free Lunch
_____ A special request from high school counselor stating that after reviewing the
guidelines (Family Income-US Dept of Agriculture levels) they believe paying an app fee
would present a hardship
_____ Student participates in a federally funded TRIO Program
_____ Student has been provided with a waiver code. (please enter code below)

__________________________________________________
Student Signature

__________________________________________________
What Semester are you applying for?

__________________________________________________
Student Phone Number

__________________________________________________
Student Email

__________________________________________________
Counselor Name and Signature or Waiver Code

Please return form to:
Gaylene Stinman,
Admissions Recruiter
NCTA
404 E 7th St
Curtis, NE 69025