



STUDENT WAIVER ROSTER
TUITION AND MANDATORY FEE WAIVERS

PLEASE SUBMIT ORIGINAL COMPLETED FORM TO GRANT ACCOUNTING (E-222)

FOAPAL: Fund: [] [] [] [] [] [] Org: [] [] [] [] [] [] Prog: [] [] [] [] [] [] Activity: [] [] [] [] [] []

OSP# _____

Term _____, 20__

Grant name: _____

Project Director/Department: _____

Contact Name: _____ Extension: _____

Course Number/Name: _____ Course Credit Hours: _____

Total Number of Waivers: _____ Tuition Only: [] Tuition & Mandatory Fees: []

Project Director Signature: _____ Date: _____

Table with 3 columns: Name, SSN/NEIU ID, Credit Hours (if varies). Multiple rows for student entries.

FOR GRANT ACCOUNTING USE ONLY
DETAIL CODE (Controller): _____
Grant Accounting Signature: _____ Date: _____
Extension: _____