

**FINANCIAL NEEDS BASED APPLICATION  
FOR EDUCATIONAL FEE WAIVER**

Office of Student Accountability & Restorative Practices • James Madison University

---

Name: \_\_\_\_\_ Email: \_\_\_\_\_@dukes.jmu.edu

I.D. #: \_\_\_\_\_ Case #: \_\_\_\_\_

**NOTE:** Applications MUST be returned to the Office of Student Accountability & Restorative Practices **one business day** prior to your scheduled program. A fee **cannot** be waived after it has been billed to you. You will be notified of the decision by e-mail or in your sanction notification prior to your scheduled program. **If you fail to comply with your sanction, the fee waiver will be voided.** An educational program fee can only be waived **one time** per student, as defined in the JMU Student Handbook.

---

**1. What educational program/workshop(s) were you assigned?**

Program: \_\_\_\_\_ Date(s): \_\_\_\_\_

Program: \_\_\_\_\_ Date(s): \_\_\_\_\_

**2. Do you pay for your own education (tuition, room/board/rent)? If so, by what means are you able to fund your expenses?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grants       Scholarships       Loans       Other \_\_\_\_\_

**3. Do you have a job? If so, how many hours a week do you work? If not, why?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Why do you feel that your \$50 fee should be waived due to your financial need?** *(Additional writing space available on the back.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

