

Graduate tuition waivers are awarded on a competitive basis by departments/schools offering graduate programs to students who show promise for success and who have not received a fellowship or other award funding tuition costs. Tuition waivers cover tuition only. The student is responsible for paying the required fees. Submit this form to your department.

1. **Students with an established GPA, must maintain a minimum 3.0 GPA. Students without a graduate GPA, must have a minimum of 2.8 for the last 60 hrs. of undergraduate GPA.**
2. **Student must be fully admitted into a degree program. Students on probation and visiting students are ineligible for tuition waivers unless they are teaching a course for a department.**
3. **Tuition waivers may only be used to cover coursework that will be placed on the degree audit and count towards the student's degree.**
4. **No more than 3 thesis/dissertation hours beyond those required for the degree.**
5. **Students must be in academic good standing.**
6. **Submitted on time (Deadlines): August 20 (fall)      January 20 (spring)      May 20 (summer)**

Name \_\_\_\_\_ UID# \_\_\_\_\_  
Local address \_\_\_\_\_ Email address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- ☐ Illinois resident      ☐ Illinois non-resident      (For residency guidelines see <http://policy.illinoisstate.edu/students/2-1-17.shtml>)
- Admission status ☐ Admitted to graduate school **Note:** Seniors admitted to a graduate program taking graduate courses are not eligible.  
☐ Applying for admission      ☐ Fall (August)      ☐ Spring (January)      ☐ Summer      20\_\_\_\_  
☐ Have not applied for admission
- Degree in which you will be enrolled ☐ Master's    ☐ MFA    ☐ Specialist    ☐ Doctoral    ☐ Other
- Degree program \_\_\_\_\_ Current Grad. GPA / Last 60 hr. GPA \_\_\_\_\_
- Graduate hours completed at ISU \_\_\_\_\_

Term applying for a waiver? \_\_\_\_\_

Number of credit hours for which you expect to register \_\_\_\_\_ Hours for which you are requesting a tuition waiver \_\_\_\_\_

Reason for requesting a tuition waiver? ☐ Academic/performance merit ☐ Financial need ☐ Other (specify) \_\_\_\_\_

Is your tuition being paid by any other source? ☐ no ☐ yes If yes, please explain

I certify that the information on this application is correct. I authorize release for university use of this and other information to verify my eligibility for a graduate tuition waiver.

X \_\_\_\_\_  
Student signature Date

ILLINOIS STATE UNIVERSITY

**STATEMENT OF REGISTRATION COMPLIANCE 2021-2022**  
**FOR STATE OF ILLINOIS SCHOLARSHIP / GRANT RECIPIENTS**  
**Academic Period Covered by Awards: July 1, 2021 to June 30, 2022**

Please complete this form and return it to your department/school with the tuition waiver application. Failure to do so will keep your military awards(s) and/or other state scholarship(s) from being credited to your student account. If funds have already been credited to your account, they will be debited and your next bill will show a balance owed.

UID Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_

**Selective service registration.** You will not receive federal, state or other financial aid offered you unless you complete this form and, if required, furnish proof to Illinois State University supporting your answer. **Mark ONE response. Do not leave this section blank.**

1. ☐ I **certify** that I am registered with the Selective Service; OR
2. I **certify** that I am not required to be registered with the Selective Service because:
- a. ☐ I am female.
  - b. ☐ I have not reached my 18th birthday.
  - c. ☐ I was born before 1960.
  - d. ☐ I am in the armed services of the United States, on active duty. NOTE: Members of the Reserves or National Guard are not considered to be "on active duty."
  - e. ☐ I am a permanent resident of the Federated States of Micronesia, the Marshall Islands, or Palau.
  - f. ☐ I am not a citizen of the United States of America.
  - g. ☐ I am age 26 or over and gained United States citizenship on or after age 26.

**WARNING:** If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both.

Signing this statement certifies that all information reported is true, complete and accurate.

\_\_\_\_\_  
Student's signature (in black ink)

\_\_\_\_\_  
Today's date

## FOR GRADUATE DEPARTMENT USE ONLY

(This section must be completed and kept on file in the department/school along with the completed application.)

Each department/school is required to have their own criteria for awarding that is updated each year. Please be sure that either the department/school's website or a coversheet outlining the criteria is available to applicants.

Admitted to degree program: ☐ Y ☐ N **\*Note:** Seniors admitted to a graduate program taking graduate courses are not eligible.

Type of admission: ☐ Full ☐ Conditional

GMAT / GRE score (If applicable) \_\_\_\_\_ TOEFL / IELTS score \_\_\_\_\_

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### This section must be completed by the Graduate Coordinator.

Student meets university and department/school criteria for award ☐ Y ☐ N

Student is recommended for the award: ☐ Y ☐ N

If denied, state reason: \_\_\_\_\_

X \_\_\_\_\_  
Signature of Graduate Coordinator Date

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### This section must be completed by the Department Chair/School Director.

Student is recommended for award ☐ Y ☐ N

If denied, state reason: \_\_\_\_\_

X \_\_\_\_\_  
Signature of Department Chair/School Director Date

Notification sent to student ☐ Y ☐ N Date sent \_\_\_\_\_

**Reminder:** All documents are to be kept on record for 5 years after the student ceases to be enrolled at Illinois State University. Departments/Schools must also keep all documents for all rejected waiver applicants and document why the student was not selected. All documents related to the tuition waiver programs must be readily available in an audit. Documents can be kept electronically in the department/school.

Financial Aid Item Type: 9005100048\_\_