

FEE WAIVER REQUEST FORM – ASHESI UNIVERSITY

If you are financially unable to pay your application fee kindly complete the form below to be considered for an application fee waiver from Ashesi University. Please attach **this form** to your application and submit along with your other required documents:

1. Student's First Name: _____
2. Last Name: _____
3. Email Address: _____
4. Phone Number (including area code): _____
5. Date of Birth: _____
6. Check one: ☐ Dependent Student (living with parents/guardian) ☐ Independent Student (living alone)
7. Household size (if you are a dependent student): _____
8. Total annual household income (in USD): _____
9. Explain why you cannot afford the application fee to Ashesi University:

Please attach a copy of your high school transcript/term reports and/or official results slip (if available).

VERIFICATION

This section of the fee waiver request form should be completed and signed by a high school counsellor/mentor/partner institution.

1. Name of High School/Organisation: _____
2. Name of Counsellor/Mentor/Partner rep: _____
3. Signature: _____ Date: _____

To the best of my knowledge, the student is financially unable to afford the application fee for Ashesi University.

Please Note: If you are granted an application fee waiver based on inaccurate data, your fee waiver will be cancelled and you will be billed.

Application fee waivers can only be waived prior to the application deadline for each round. **As such, the student should complete and submit his/her application during the round within which a waiver was granted.**

Student's Signature: _____ Date: _____

Parent/Guardian's signature: _____ Date: _____