

Office of the University Registrar 100 State Street PO Box 9101 Framingham, MA 01701-9101 (P) 508-626-4545 (F) 508-626-4589

## **Day School Geographic Tuition Grant Program**

Student Information: (Please Print)	
Name:	Semester Admitted:
Major:	FSU Student ID#:
Anticipated Semester/Year of Graduation:	
Home Town/City & State or Country:	
FSU Student Email Address:	@student.framingham.edu
University attending through the Day School will be charged A Geographic Tuition Grant will be applied to the student' for the current published In-State tuition amount and all Fe. The student will be classified as an Out-of-State Resident Program attribute in order to track and apply the Grant each Eligibility Requirements:	s semester tuition charges. The student would then be responsible es for the semester.  for tuition purposes but will have the Geographic Tuition Grant h semester.  ranting public institution within a 500-mile radius of the student's
Student's Signature	Date
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DOCUMENTATION REGARDING STUDEN	NT'S ELIGLBILITY:
1) Verification of Student's geographic proximity to a	a four-year public institution:
	dence eligibility for the above referenced Geographic Tuition Grant Program that pertains to this student the Grant Tuition has been granted for the period
Fall Semester Spring Semes	ster
Signature of University Registrar (or desi	ignee) Date