

Office of the University Registrar 100 State Street PO Box 9101 Framingham, MA 01701-9101

CERTIFICATE OF TUITION WAIVER Graduate Studies and Continuing Education

Category: Senior Citizen

Student Information	<u>1:</u>		
Name:	P	NO. IN T. S. I.	
Last	First	Middle Initial	
Social Security Num	ber (required):	<u></u>	
which is acceptable	any course offered through the Depart toward an undergraduate degree p adio fees, per course will assessed. P	rogram or certificate program	n. An audit fee, plus
Category:			
[] Senior Ci	tizen (Persons aged 60 or over).	Date of Birth: /	
Eligibility Certificate	ion:		
for any previously red	eachusetts Resident and I am not in deceived Financial Aid. I have also probility for the above referenced Catego	vided the University with the re	
Student's Signature		Date	
DOCUMENTATIO	ON TO BE SUBMITTED BY THE	STUDENT:	
Senior Citizen:	[] Check here if the documentation	on is on file from a previous se	emester's enrollment.
1) Documentat	ion of Age - Birth Certificate or Driv	ver's License. (A photocopy of eithe	er document is acceptable.)
2) Proof of Ma	ssachusetts Residency – Completed	l and included with this Waive	r.
******	****** Office Use (Only **************	******
	nas provided the required documentation to evide of Higher Education Tuition Guidelines and windicated below:		
	Signature of Registrar (or Designee)	 Date	