## **CERTIFICATE OF TUITION WAIVER**

STUDENT'S NAME:			SEMESTER:
ADDRESS:			
	ve tuition for persons o		of Massachusetts, Westfield State on, institutional fees, and related expenses
	the Waiver Form compate issued ID, or passpo		ration. Proof of date of birth is required
		CATEGORY Senior Citizen	
	Date of Birth  Document of Proof		
ELIGIBILITY CEF	RTIFICATION		
refund for any prev	ious received financial		It of any federal student loans or owe a ed the University with the required gorical tuition waiver.
Student Signature			
Return Completed form to Student Accounts 333 Western Avenue Westfield, MA 01086			
Office Use Only: Document Type Submitted:			
Driver's License	State Issued ID	Passport	
REV. 02/2023			