



OHIO
UNIVERSITY

The Gladys W. and David H.
Patton College of Education

The OHIO Center for Clinical Practice in Education

SCHOOL DISTRICT'S FEE WAIVER FORM

APPLICATION FOR USE OF DISCOUNTED GRADUATE FEE WAIVER

Return completed form by email to: Dawn Mooney at mooneyd@ohio.edu

By using this graduate fee waiver you agree to pay 50% of the amount of the waiver (includes the instructional and general fee) given to you by your school district. You must be admitted to Ohio University as a graduate student and registered for Patton College courses to receive a **graduate fee waiver**. Failing to officially register for the course(s) you request will cancel your graduate fee waiver. **NOTE:** Fee waivers can ONLY be used for graduate courses.

Name of Applicant: _____ PID # _____

Home Address: _____ Telephone Number: _____

E-mail: _____

School Name: _____ School District: _____

School Address: _____ Telephone Number: _____

NUMBER OF GRADUATE FEE WAIVERS APPROVED BY SUPERINTENDENT:

Semester/Year (i.e. Fall Semester 2021-22): _____ Campus: _____

Credits/Units: _____ Course Sub/Catalog # (i.e.-EDTE 2200): _____ Class # (i.e.-2576): _____ Section: _____

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SUPERINTENDENT'S SIGNATURE DATE

***Superintendent, please make sure the number of graduate fee waiver(s) approved is stated above.**

APPLICANT'S SIGNATURE DATE

Do not complete this section; this section will be completed by the Patton College of Education

_____ hours of graduate instructional fees totaling \$ _____ charged to 10-100000-130735-0000-10

_____ hours of graduate general fees totaling \$ _____ charged to 10-100000-130735-0000-10