

GRADUATE STUDENT FEE WAIVER EXPENSE AUTHORIZATION

The ***Graduate Student Fee Waiver Expense Authorization Form*** is used to notify the Graduate College that your department will provide a fee waiver to pay the instructional, non-resident, general or limited miscellaneous fees charged to the Bursar bill of a graduate student attending BGSU. The completion of this form will provide the Graduate College with the required information that will allow us to enter a fee waiver on the student's record in the Financial Aid System at BGSU. The fee waiver will be disbursed to the student's Bursar account after they have registered for classes.

Directions for completing the form:

1. Enter the **student's BGSU ID, field of study, first name and last name.**
2. Enter the **Name, Department, e-mail address and phone number** of the BGSU staff member making the request for the fee waiver.

The form is divided by the three semesters in each fiscal year (Summer 09, Fall 09, Spring 2010). There are four fees that can be paid in each semester (Instructional, Non-Resident, General, Other)

3. Choose the **semester(s)** for which you will provide a fee waiver.
4. Choose the **fees** you will pay in each semester.
5. For each fee enter the **FUND, DCC *or* PROJECT ID, PROGRAM CODE** (optional), and the **# of CREDIT HOURS** or **AMOUNT** you will cover.
6. Enter the name of the Budget Administrator for the budget #s you entered above
7. The form must be signed and dated by the Budget Administrator.

Please complete all forms on line and mail to: **Graduate College
120 McFall**

(Press the TAB key to access the form)

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(Please do not use this form to request a fee waiver paid by the Graduate College)

Please mail this form to the Graduate College, 120 McFall

Student's BGSU ID _____ Field of Study _____

First Name _____ Last Name _____

Person Making Request _____

Department _____

Email _____ Phone _____

Summer 2009		<i>(enter one)</i>		<i>optional</i>		<i>(enter one)</i>	
FEE	FUND	DEPT COST	PROJECT	PROGRAM	ACCOUNT	# OF CREDIT	\$ AMOUNT
		CENTER	ID	CODE	CODE	HOURS	
INSTRUCTIONAL					58200		
NON-RESIDENT					58210		
GENERAL					58220		
OTHER					58230		

Fall 2009		<i>(enter one)</i>		<i>optional</i>		<i>(enter one)</i>	
FEE	FUND	DEPT COST	PROJECT	PROGRAM	ACCOUNT	# OF CREDIT	\$ AMOUNT
		CENTER	ID	CODE	CODE	HOURS	
INSTRUCTIONAL					58200		
NON-RESIDENT					58210		
GENERAL					58220		
OTHER					58230		

Spring 2010		<i>(enter one)</i>		<i>optional</i>		<i>(enter one)</i>	
FEE	FUND	DEPT COST	PROJECT	PROGRAM	ACCOUNT	# OF CREDIT	\$ AMOUNT
		CENTER	ID	CODE	CODE	HOURS	
INSTRUCTIONAL					58200		
NON-RESIDENT					58210		
GENERAL					58220		
OTHER					58230		

Signature of Budget Administrator _____ Date _____

Printed Name of Budget Administrator _____