



Student Accounts Office
The Commonwealth of Massachusetts
Certificate of Tuition Waiver

This waiver covers tuition only. The student is responsible for any other fees assessed to his/her account.

Student ID #: _____
Student Name: _____
Student Address: _____
Street

City State Zip

Category

- | | |
|---|---|
| <input type="checkbox"/> Current Arm Forces | <input type="checkbox"/> Client of Massachusetts Rehabilitation |
| <input type="checkbox"/> Commission for the Blind | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Veteran | <input type="checkbox"/> Senior Citizen: at least 60 years old |

* **Senior Citizens:** Permanent MA residents 60 years of age or over may take a 3-credit course for \$50 or a 4-credit course for \$65.

Eligibility Certification

I certify (**must check off**) that I meet each of the following eligibility criteria:

- I have been a permanent legal resident of Massachusetts for at least one year.
- I am a United States citizen or eligible non-citizen.
- I am in compliance with applicable Selective Service registration laws.
- I am not in default of any federal or state loan or owe a refund on any previously received financial aid.
- I have provided the college with the required documentation to substantiate eligibility for the above referenced tuition waiver.

Student Signature

Date

For Office Use:

Fall Semester: _____ Spring Semester: _____ Summer Semester: _____

Bedford Campus
Springs Road
Bedford, MA 01730-9124
781-280-3645

Lowell Campus
Kearney Square
Lowell, MA 01852-1901
978-656-3291