



WILLIAM PATERSON UNIVERSITY

FINANCIAL AID OFFICE
300 POMPTON ROAD • WAYNE, NEW JERSEY 07470-2103
973.720.2202 FAX 973.720.3133

Institutional Application for Unemployed Tuition Waiver

Name: _____ ID: 855
Please Print Last Name First Name

WPUNJ Email: _____@student.wpunj.edu
(Communication will be via your WPU email address ONLY)

Indicate Application Term:

- Fall
- Winter
- Spring
- Summer

Eligibility

Students must:

- File a Free Application for Federal Student Aid (FAFSA) at www.fafsa.ed.gov at least 30 days prior to the beginning of the semester or summer session. A PIN is needed to sign the FAFSA electronically; PINs can be obtained or retrieved by accessing www.pin.ed.gov.
- Obtain a signed Waiver/Referral from your unemployment counselor.
- Have an activated WPUNJ email address.
- Not be in a default on student loans.
- Must meet Financial Aid Satisfactory Academic Progress (if returning student)
- Register for classes on designated tuition waiver registration date.
- Complete and submit all requested and required paperwork to the Financial Aid Office.

Registration:

- A \$20.00 Registration fee will be charged to your account per semester/session.
- Students must register on the specified registration date. Early registration of classes will result in your application for waiver being denied.
- Enrollment is limited to space-availability with the exception of those students who successfully obtain a permit.
- Fees not applicable to waiver: tuition waiver application fee, late fee, lab fee, insurance, housing, distance learning, parking, late registration, and student teaching. Additional fees may not be covered.

INCOMPLETE APPLICATIONS WILL NOT BE HONORED

For questions, please contact Tamar Montuma at montumat@wpunj.edu

By signing this document you are agreeing with the terms above and the Waiver Policy at: <http://www.wpunj.edu/financial-aid/unempfaq.dot>

I understand the Referral/Waiver will not be approved unless all documentation is submitted by the deadline date and I have met all other requirements.

Student's Signature

Date

Phone number: _____ (Please provide primary phone number)