

ALL FORMS MUST BE COMPLETED IN FULL IN ORDER TO BE PROCESSED. INCOMPLETE FORMS WILL BE RETURNED TO APPLICANT. (NEW FORM REQUIRED FOR EACH TERM.)

ARE YOU A RESIDENT OF THE STATE OF INDIANA? _____ YES _____ NO

ONLY RESIDENTS OF THE STATE OF INDIANA ARE ELIGIBLE FOR THIS REMISSION.

NAME: _____ DATE OF APPLICATION: _____

ADDRESS: _____ STUDENT ID NUMBER: _____

_____ DATE OF BIRTH: _____

TELEPHONE NUMBER: _____

SEMESTER: _____ YEAR: 20 _____

NUMBER OF CREDIT HOURS THIS SEMESTER: _____

HIGH SCHOOL GRADUATION/GED DATE: _____

DEGREE SEEKING STUDENT? YES _____ NO _____

IF YES, and applying for financial aid, the Financial Aid Office is aware of all my financial resources including this tuition exemption.

I certify by signing below that:

- (1) I am a resident of the State of Indiana.
- (2) I am retired.
- (3) I am not employed on a full-time basis.
- (4) I am at least sixty [60] years old.
- (5) The above information is correct.

APPLICANT SIGNATURE

DATE

In order to receive the tuition exemption, you must complete this form and return it to the Student Accounts Office located in LAWS 130.

STUDENT ACCOUNTS OFFICE USE ONLY		
DATE ENTERED _____	INITIALS _____	AUDITED _____

Plan for success with Purdue University Calumet