Homeless Fee Exemption Request Form

According to Florida Statue 1009.25 (f), a student who is homeless may be exempt from paying tuition and fees. The statute defines a homeless student as one who “lack a fixed, regular, and adequate nighttime residence, or whose primary nighttime residence is a public or private shelter designed to provide temporary residence for individuals intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings”.

This form, along with documentation from a homeless shelter, school district homeless liaison, USF Student Outreach and Support, or a runaway shelter is to be submitted to the Homeless Tuition Waiver Committee. The form can be submitted via email to homelesswaiver@usf.edu, or in person at SVC 2058.

| NAME _______________________________ | SEMESTER/YEAR FOR EXEMPTION REQUEST: FALL _____ SPRING _____ SUMMER _____ |
| U# _______________________________ | REASON for REQUEST: (check any that apply) |
| USF EMAIL _______________________________ | _____ lacks a fixed, regular, and adequate nighttime residence |
| PHONE _______________________________ | _____ primary nighttime residence is a homeless shelter |

By signing this form, you attest that you meet definition of a homeless student as provided by the Florida statute.

__________________________________________ ______________________________
Signature of Student Date

FOR COMMITTEE USE ONLY

☐ Approved ☐ Denied

Signatures of Committee: ____________________________________________ Date: ____________
__________________________________________ Date: ____________
__________________________________________ Date: ____________
__________________________________________ Date: ____________
__________________________________________ Date: ____________
__________________________________________ Date: ____________

NAME _______________________________
U# _______________________________
USF EMAIL _______________________________
PHONE _______________________________