



Higley Unified School District

School Fee Waiver Request

To request a waiver of the Higley Unified School District Student Fee(s) for your child for the current school year, please submit the following form to your site office manager to begin the approval process.

Student Name _____ Student ID: _____

School: _____ School Year: _____ Grade: _____

Parent/Guardian: _____ Phone: _____

Specific reasons for request:

Class/Activity: _____ Amount: \$ _____

Class/Activity: _____ Amount: \$ _____

Class/Activity: _____ Amount: \$ _____

Class/Activity: _____ Amount: \$ _____

Class/Activity: _____ Amount: \$ _____

Class/Activity: _____ Amount: \$ _____

Total Amount: \$ _____

I understand that all fee waivers must be approved by the principal of the school listed above. This request must be made on an annual basis and is not retroactive. I also understand that this request for a waiver is not automatic. Additionally, I acknowledge that the school principal has the right to request a meeting regarding the fee waiver request before approval of the wavier.

Signature of Parent/Guardian: _____ Date: _____

SCHOOL OFFICE USE ONLY:

Fee Paid from Account Code (Expense): _____

Fee Paid into Account Code (Revenue): _____

Approved School Percentage: _____ Approved Parent Percentage: _____

Principal Signature: _____ Date: _____