



APPLICATION FOR JESUIT HIGH SCHOOL TEACHER'S PARTIAL TUITION WAIVER PROGRAM

For students matriculated in a Graduate School of Arts and Sciences master's degree program.

Tuition waivers are subject to availability of funds.

Submit completed forms to: GSAS Office of Academic Programs and Support in Keating Hall 216.

Student's Name: \_\_\_\_\_ F.I.D.N.: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fordham email: \_\_\_\_\_

Name of Jesuit High School where employed: \_\_\_\_\_

High School Address: \_\_\_\_\_

Name of GSAS Degree Program: \_\_\_\_\_  MA  MS

Date of Matriculation (semester and year): \_\_\_\_\_

Credits Earned Toward Degree: \_\_\_\_\_ Current GPA: \_\_\_\_\_

Current Semester:  Fall  Spring  Summer Year: \_\_\_\_\_

Courses for which tuition waiver is requested:

Table with 3 columns: Course Number, # of Credits, Course Title. It contains four empty rows for data entry.

By signing below, I certify that:

- I am a full time faculty member or administrator at Loyola School, Regis High School, St. Peter's Prep, or Xavier High School.
I have been admitted to an M.A. or M.S. program in the Graduate School of Arts and Sciences. (Non-matriculated status does not fulfill this requirement.)
I intend to work at the school at which I am employed for at least two years after the completion of course work.
I understand that I must maintain a GPA of 3.5 in order to receive the tuition waiver.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Endorsement of High School Principal**

By signing below, I, \_\_\_\_\_ certify that \_\_\_\_\_  
is a full time faculty member or administrator at \_\_\_\_\_  
school and has my endorsement to pursue the courses indicated on this form during the  
\_\_\_\_\_ semester.

Signed: \_\_\_\_\_  
Principal Signature

Date: \_\_\_\_\_

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**GSAS Office Use Only**

# of credits: \_\_\_\_\_ x \$ \_\_\_\_\_ per credit x .5 = \_\_\_\_\_ Total Amount Waived

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
GSAS Dean's Office