

Jackson State University

APPLICATION FOR OUT-OF-STATE TUITION FEE WAIVER Effective Summer 2017 (Must be postmarked by July 15th)

| JSU Student ID: | | | Term of Enrollment: | |
|--|---|------------------------------|-----------------------------|---|
| Last: | | First: | | Middle: |
| Address: _ | | | | |
| City: | | State: | | Zip: |
| Telephone: | | | Date of Birth: | |
| | | | | (MM/DD/YYYY) |
| | | pplication for each fall sen | | equirement will be reviewed at the end semester for graduate students. |
| Check the ap | propriate category belo | w: | | |
| | olars (50% waiver) ulation of 50,000 or more | | reside in an Urban Area, de | efined by the US Census Bureau as an area |
| | First-time Freshman (50% waiver) No entering GPA Requirement; must be fully admitted into an undergraduate degree seeking program; must earn at least 30 hours each academic year; and must maintain a 2.75 Cumulative GPA for renewal each academic year. Submit this completed application to Undergraduate Admissions: 1400 John R. Lynch Street, P.O. Box 17330, Jackson, MS 39217; fax to (601)-979-3445 or E-mail to osfwaivers@jsums.edu. (Awarded a maximum of 8 semesters) | | | |
| | New Transfer Student (50% waiver) Must have a minimum of 3.0 cumulative GPA from transferring institution; must be fully admitted into an undergraduate degree seeking program; must earn at least 30 hours each academic year; and must maintain a 3.0 Cumulative GPA for renewal each academic year. Submit this completed application to Undergraduate Admissions: 1400 John R. Lynch Street, P.O. Box 17330, Jackson, MS 39217; fax to (601)-979-3445 or E-mail to osfwaivers@jsums.edu. (Awarded a maximum of 8 semesters) | | | |
| | First-time Graduate Student (50% waiver) Must have an undergraduate cumulative GPA of 3.5 or above; must earn at least 18 hours each academic year; and must maintain a 3.5 Cumulative GPA for renewal each semester. Submit this completed application to Graduate Admissions: 1400 John R. Lynch Street, P.O. Box 17095, Jackson, MS 39217 or E-mail to graduate@jsums.edu. (Maximum award renewal: Master's = 4 semesters; Specialist = 6 semesters; Doctoral = 8 semesters) | | | |
| MS Native | (100% waiver) | | | |
| | The applicant was born in the state of Mississippi, but subsequently relocated and resided outside the state as a minor under the care of the minor's legal guardian, father, mother, or both. Submit this completed application & a copy of your birth certificate to Undergraduate Admissions: 1400 John R. Lynch Street, P.O. Box 17330, Jackson, MS 39217; fax to (601)-979-3445 or E-mail to osfwaivers@jsums.edu. | | | |
| MISREPRESE | NTATION OR OMISSION ND THAT SUBMITTING | OF INFORMATION WILL C | AUSE MY OUT-OF-STATE F | N IS TRUE AND CORRECT AND THAT TEE WAIVER TO BE DISAPPROVED. TVER APPROVAL, BUT IS BASED UPON |
| Student's Signature: | | | Date: | |
| ************************************** | | | | |
| APPROVED DISAPP. | | DISAPPROVI | ED | SEMESTER |
| | | | | |