



CHESAPEAKE COLLEGE FOSTER WAIVER CERTIFICATION FORM

Student's Name: \_\_\_\_\_ Chesapeake College Student ID#: \_\_\_\_\_

Chesapeake College has a policy of waiving course tuition and mandatory fees for certain Maryland foster care residents who meet the stated criteria. This form is authorization to certify eligibility based on the database on Maryland Higher Educations' website. If your name does not appear on the Foster Care database, you will not be eligible for the waiver of tuition and fees. Furthermore, if you do not complete the term and received federal financial aid in addition to the waiver, you will be responsible for payment of any refund received to Chesapeake College or the U.S. Department of Education.

Please check the statement below that applies to your situation:

- Placed in an out-of-home placement by the Maryland Department of Human Services (MDHS); or
In an out-of-home placement on the your 18th birthday or at the time you graduate from high school or successfully completed a GED; or
In an out-of-home placement on or after your 13th birthday for at least one year and was placed into guardianship, adopted, or reunited with at least one of your parents; or
Been the younger sibling of an individual who met the first two eligibility requirements and were adopted or entered a guardianship concurrently with that sibling with the same adoptive parent or guardian.

Please note: The tuition waiver only applies to tuition and fees. This also includes all fees for credit bearing and non-credit courses required as a condition of enrollment. If a foster care recipient receives a scholarship or grant, the scholarship or grant may not be applied to the tuition for the foster care recipient.

Renewing the Waiver: You must self-certify each Academic Year that you are eligible for the Foster Care Waiver by presenting this completed Waiver at the time you register for courses. You must file the FAFSA each year to receive the waiver for up to an additional nine years or until your Bachelor's degree is awarded, whichever occurs first.

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

Return completed Waiver to:

Laura Shahan
Assistant Director of Finanical Aid
Chesapeake College
lshahan@chesapeake.edu
410-822-5400 ext. 2253

Chesapeake College Office Use Only

Tuition \$ \_\_\_\_\_ Fees \$ \_\_\_\_\_ Waiver Amount \$ \_\_\_\_\_

FAFSA Filing Date: \_\_\_\_\_ Fiscal Year: \_\_\_\_\_

I certify the student's name appeared on the DHR database and meets all eligibility criteria.

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