



FOR OFFICIAL USE ONLY

Date: \_\_\_\_\_  
Fiscal Year: \_\_\_\_\_  
Stud. ID#: \_\_\_\_\_

### Certification for Tuition Waiver

P.O. Box 8, 1000 College Circle, Wye Mills, MD 21679  
410-822-5400; 410-758-1537; 410-228-4360, ext. 5845 Fax: 410-827-5878  
[www.chesapeake.edu](http://www.chesapeake.edu) TTY Users: Call via Maryland Relay

Student Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

I will be enrolling in  CREDIT  CONTINUING EDUCATION courses. For  Fall  Spring  Summer Sessions

(The student signature authorizes the Social Security Administration to release information on the above named individual and acknowledges that this form is valid for one academic year and must be renewed each academic year. ***In addition, student acknowledges that he/she must apply for financial aid.***)

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Student Signature

**DATE:** \_\_\_\_\_

#### Certifying Official please indicate the type of benefit this individual is currently receiving.

I certify that the above named individual is out of the work force as a result of a permanent disability and is receiving a  **SSDI** (social security disability benefit)  **SSI** (supplemental security income) as defined by the Social Security Act, Railroad Retirement Act, or in the case of a former federal employee, from the federal retirement or pension authority (U.S. Office of Personnel Management). ***Individuals receiving SSI or SSDI benefits as a dependent or survivor of a disabled beneficiary do not qualify for this waiver.***

Social Security Administration  
for Official Stamp Only

\_\_\_\_\_  
Printed Name of Certifying Official

\_\_\_\_\_  
Signature of Certifying Official

**DATE:** \_\_\_\_\_

**Please return this completed form to: Chesapeake College, Attn: Princess Williams, Director of Financial Aid, P.O. Box 8, Wye Mills, MD 21679. For more information, call 410-827-5845; Email: [pwilliams@chesapeake.edu](mailto:pwilliams@chesapeake.edu).** Your FAFSA and WAIVER FORM must be received BEFORE the 50% refund period of EACH term you wish to register. Please refer to our current college catalog for specific dates. Continuing Education programs must meet the career workforce training as defined and approved under WIA training programs on the Maryland Higher Education Commission website at <http://webapps.dllr.state.md.us/wioa/WIACountyPgm.aspx>. A FAFSA is not required for approved career non-credit programs.

#### **FOR FINANCIAL AID OFFICIAL USE ONLY**

Federal/State Aid \$ \_\_\_\_\_ Full Waiver  Waiver Code  **SSDI** \_\_\_\_\_  **SSI** \_\_\_\_\_

Partial Waiver  **SSDIP** \_\_\_\_\_  **SSIP** \_\_\_\_\_ FAFSA Complete  Year(s) Completed: \_\_\_\_\_

Comments: \_\_\_\_\_

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