VERIFICATION OF STUDENT FINANCIAL BACKGROUND AND STATUS
for Application Fee Waiver to the University of Iowa Graduate College

To be completed by the Prospective Student. Please ensure that both sections of this form are complete before submitting.

Name___________________________________________________________

Last (family or surname) First (given name) Middle

Email________________________________________________________________________

Graduate Program to which you are applying_____________________________________

Semester/Year to which you are applying_________________________________________

I request that_______________________________________________________________

(Name of Institution)

provide the information below so that I may be considered for an application fee waiver.

Signature___________________________________ Date: __________________________

To be completed by the Financial Aid Office at your undergraduate or current institution.

I certify that the above-named student (check all that apply):

☐ Is receiving financial aid and paying the application fee would present a financial hardship
☐ Shows other evidence of having grown up in a substantially low-income/economically-disadvantaged family. Please explain: ____________________________________________________________

________________________________________________________

Name/Title: __________________________________________________________________

Signature: __________________________________________ Date: ______________________

Email: ________________________________________________________________________

Institutional stamp:

Please ask the Financial Aid Office at your undergraduate or current institution to complete the form with signature and stamp. Upload the completed form to the Fee Waiver Documentation section of your Admissions Profile in MyUI (myui.uiowa.edu).