



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 _____ provide the information below so that I may be considered for an application fee waiver.
(Name of Institution)

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:
