



Criteria for Chancellor's Waiver

The Chancellor's Waiver is awarded to a limited number of students. Consideration for the Chancellor's Waiver is given to students with circumstances that preclude them from receiving other financial assistance. The student must be experiencing a financial hardship where it would otherwise be difficult to make a full tuition payment. The SOWELA tuition waiver committee will review the student's application and based on available funding will determine if the waiver is approved. Based on available funding, waivers can be approved for up to \$1000.

Students must:

- Be enrolled in a program that will lead to a diploma, certificate, or degree.
- Have earned a SOWELA GPA of 2.0 on a 4.0 scale if continuing.
- Provide a detailed statement written by the student explaining the circumstances as to why the waiver is being requested. The letter should explain any financial hardship that the student is facing.
- Must have applied for and accepted all Federal and State Financial aid for which the student qualifies.

SOWELA Chancellor's Waiver Application

Completed application packets must be returned to the One Stop Center by the dates listed below.

Fall - August 1

Spring - December 15

Summer - May 1

Full Name: _____ Student ID#: _____

Address: _____
Street City State Zip

Home Telephone: _____ Cell Phone: _____

E-mail address: _____

Program of Study at SOWELA: _____

Explain in detail why you are requesting a tuition waiver (attach additional sheets or documentation of situation if needed)

I hereby certify that the information submitted in this application is true, correct, and complete to the best of my knowledge. In addition, I authorize SOWELA Technical Community College to access my electronic academic record. I understand that completing this form does not guarantee that I will receive a waiver. In addition, any debts owed to SOWELA Technical Community College must be paid prior to the disbursement of tuition waiver funds.

Signature: _____ Date: _____

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Diploma, Certificate or Degree-Seeking Program: Yes No	
Overall SOWELA GPA: _____ (Required for Continuing Student and Chancellor Waiver)	
Submitted FAFSA for current year: Yes No	
Waiver Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Exemption Amount: _____
Semester Awarded: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	Student Notified of Decision: <input type="checkbox"/> Yes <input type="checkbox"/> No
FAO Staff Member: _____	

SOWELA Technical Community College does not discriminate on the basis of race, color, national origin, gender, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies:

Title: Compliance Officer
Address: 3820 Sen J Bennett Johnston Ave
Telephone No.: 337-421-6565 or 800-256-0483
Email: complianceofficer@sowela.edu