



Crystal Lake Elementary District 47

300 Commerce Dr., Crystal Lake, IL 60014 (815) 788-5000

www.d47.org  /D47schools  @crystallakesd47

APPLICATION FOR WAIVER OF SCHOOL FEES

Parent/Guardian Name and Address (Please print legibly)

Date _____

Name

Street Address

City/State/Zip Code

Email address:

STUDENT ID	STUDENT NAME	SCHOOL	GRADE

The above named individual does hereby request a waiver of the following school fees:

- Book Rental/Registration Fee
- Athletic/Sports/Poms/Cheerleading Fee
- Band/Chorus/Jazz Band Fee
- PE Uniform Fee (one set, shirt and shorts)
- Technology Fee (chromebook)

This request is for the _____ school year. **A current Free Lunch Application must be on file at the CORE Center.**

Reason(s) for this request:

- I qualify for **free** lunch or breakfast under the National/State School Lunch Program.
- Our family is experiencing very significant loss of income. Please provide information:

Signature

Relationship

Please Note:

- Applicants must apply to the District Business Office within 30 days of the start of school each year or when the need arises.
- You will receive a decision on the application with 30 days of receipt.

--BUSINESS OFFICE USE ONLY--

SCHOOL FEE WAIVER: Approved Denied

Reason : _____

Authorized Signature