



CALIFORNIA STATE UNIVERSITY, DOMINGUEZ HILLS

AUTHORIZATION FOR OLDER ADULT REGISTRATION FEE WAIVER

*THE REGISTRAR'S OFFICE
(EXECUTIVE ORDER 734)*

FOR OFFICE USE ONLY

PLACE DATE STAMP HERE

STUDENT ID: _____ PHONE NUMBER: _____

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ EMAIL: _____

Students sixty years of age and older may be eligible for an Older Adult Fee Waiver using the Older Adult Fee Waiver Form. Applicant must present documentation which establishes their identity and their age. Students using the Older Adult Fee Waiver may register on or after the first day of the term.

This form must be completed for each semester you are requesting to enroll into.

Fee Waiver Request for: Fall Spring Year _____

Procedure

1. This form must be completed and approved by the Registrar's Office and is valid only for the semester specified below.
2. Upon approval by the Registrar's Office, the following fees will be waived:
 - a. State University Fee
 - b. Health Services Fee
 - c. Late Registration Fee
3. The following fees will be reduced to \$1.00 each:
 - a. Student Activity
 - b. Student Center Fee
 - c. Facilities
4. Students may submit this form at the start of the registration period for the term until the last day of the late registration. If the student already has courses for the term at time of form submission, these courses will be dropped if student wishes to apply for this fee waiver.
5. The student must pay for all other charges.

PLEASE COMPLETE THIS FORM AND ATTACH A COPY OF YOUR STATE PHOTO IDENTIFICATION CARD TO SUBMIT TO THE REGISTRAR'S OFFICE

Student's Signature: _____ Date: _____

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Registrar's Signature : _____ Date: _____

Approved Denied Term/Year: _____

Service Indicator Updated Student Group Verified Submitted to Student Financial Services

Processed by: _____ Date: _____