

Verification of Financial Aid Graduate Application Fee Waiver Request

Complete all information and sign your request. Incomplete forms will be returned. All requests will take 5-7 business days to process.

Personal Information

Student UCM ID _____ Date of Birth: _____

Student Full Name _____
First Name Last Name M.I.

Email _____ Phone Number _____

Delivery Method

Pick up (make sure to bring a photo ID when picking up a completed verification)

Email (this will go to your UC Merced email account only)

Mail

Name

Address

City State Zip Code

Certification of Statement

I certify that I am the above named person and the information I have provided is accurate.

Student Signature _____ Date _____

Office of the Financial Aid Use Only

Financial Aid Information - to be completed by FA staff only

Academic Year _____ Estimated Family Contribution (EFC): _____

Type of Aid Received: (total amounts)

Loan: _____ Grant: _____ Other: _____

Cost of Attendance: _____

Signature of UC Merced Financial Aid Staff

Signature: _____

Title: _____ Date _____

