



SENIOR CITIZEN WAIVER FORM (For Audit)

Student Full Legal Name (Please Print)						Preferred Phone Number			
First Name	Middle Initial	Last Name							
Germanna Student ID Number						Current Term (Please Check)		Current Year	
						Fall <input type="checkbox"/>	Spring <input type="checkbox"/>	Summer <input type="checkbox"/>	20____

Under the Senior Citizens Higher Education Act of 1974 Code of Virginia 23-38.54-60, Senior citizens may apply for free tuition. Senior citizens may enroll in no more than 3 courses per semester on a space-available basis. Senior citizens may not enroll in a class unless there are available seats. Senior citizens may not enroll in a class until one week prior to the start of the session. Germanna shall determine whether or not it has the ability to offer a class. Senior Waiver students may not enroll in more than three courses per semester.

Guidelines for Eligibility

To **AUDIT** credit courses, a person must meet the following criteria:

1. Be admitted to the college as a student.
2. Be 60 years of age or older before the semester begins.
3. Be domiciled in Virginia for at least 1 year prior to the first day of classes.

Course Number	Course Subject-Section	Session	Credits

Please read before signing:

- Changes from audit to credit must be done by the last day to enroll in the class while changes from credit to audit must be done **by the last day to drop** with a refund. Please review the current Academic Calendar for important deadline dates.
- Audited courses receive the final grade of (X).
- All students are responsible for fees associated with course materials, such as book, laboratory or IncludED fees.

I hereby certify that I have read and understand the terms above regarding AUDIT courses and that I am responsible for fees associated with course materials, such as book, laboratory or IncludED fees. I also certify that I am aware that if said fees are not paid, I run the risk of being dropped from the above classes.

Student's Signature: _____ **Date:** _____

Dean's Use Only:	
<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Dean's Signature: _____	Date: _____

For Office Use Only:	
Please scan completed Senior Citizen Waiver Form to the Business Office.	
A&R Approval: Initials _____	Age Verified: Initials _____
	Domicile Verified: Initials _____
Processed by: _____	Date: _____