



Student Financial Aid Office
 11400 Robinwood Drive
 Hagerstown, MD 21742
 finaid@hagerstowncc.edu
 FAX: 301-791-9165

2018-2019 Foster Care Tuition Waiver Form

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

The Maryland Tuition Waiver for Foster Care Recipients is available to foster care youth who have completed the FAFSA, are under 25 years old, are enrolled in a vocational certificate program or as a degree-seeking student, and are meeting the Satisfactory Academic Progress standards at a Maryland Public institution of higher education. The purpose of Tuition Waiver for Foster Care Recipients is to provide financial assistance to foster care youth.

You may be exempt from paying tuition and mandatory fees at HCC. The tuition waiver only applies to **tuition and fees**. The tuition waiver does not apply to room and board, books, or other expenses incurred as part of the overall cost of attendance.

Student Name: _____ HCC ID _____

In order to be eligible for the MD TUITION WAIVER FOR FOSTER CARE RECIPIENTS, your name must be on the Department of Human Resources (DHR) list of eligible foster care students that is sent to public colleges and universities in January and July, which verifies that you meet one of the criteria listed below.

Please select the set of circumstances listed below that applies to your situation:

A. Resided in an out of home placement in Maryland at the time you graduated from high school or successfully completed a general equivalency development examination (GED);	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Resided in an out of home placement in Maryland at the time of your 18 th birthday; or	<input type="checkbox"/> Yes <input type="checkbox"/> No
C. Resided in an out of home placement on your 13th birthday, and was placed into guardianship or adopted out of an out of home placement after your 13th birthday; or	<input type="checkbox"/> Yes <input type="checkbox"/> No
D. Resided in an out-of-home placement in the State for at least 1 year on or after your 13th birthday and returned to live with their parents after the out-of-home placement ended.	<input type="checkbox"/> Yes <input type="checkbox"/> No
E. You are the younger sibling of a person who meets the qualifications stated in either A, B or C above and was placed into guardianship or adopted concurrently out of an out of home placement by the same guardianship or adoptive family.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Student Signature: _____ Date: _____