



**Scholastic  
Art & Writing  
Awards**

# Fee Waiver Form

Mail this form with your Submission Form. Keep a copy for your records.

## School Information

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SCHOOL NAME

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ADDRESS

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CITY

STATE

ZIPCODE

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EDUCATOR

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EMAIL

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TELEPHONE

## Student Information

\_\_\_\_\_ is currently enrolled in grade \_\_\_\_\_ and is eligible for a fee waiver for the Scholastic Art & Writing Awards.

Please check one of the following:

- Student is eligible for Federally subsidized free or reduced lunch.
- I certify, in good faith, that the fee to submit work to the Scholastic Awards is a barrier to the student's participation.

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SIGNATURE OF EDUCATOR OR SCHOOL OFFICIAL

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NAME (PLEASE PRINT)

TITLE