

Senior Citizen Tuition Waiver Application

University of Saskatchewan 6.06

Last Name		First Name		U of S Stu	U of S Student Number						
Date of Birth (dd/mm/yyyy)	Telephone		Email								
COURSE INFORMATION											
Subject Code	Course Number		Section Number	Section Number		Term					
Subject Code Course Number			Section Number			Term					
Subject Code	Course Number		Section Number		Term						
coarse Names.						10					
L											
Please Note: Applications m	oust he submitted prior to	o the fee navmer	nt deadline in order to avoid I	ate nenal	ties	Annl	icatio	one r	eceive		
			ubmitting applications is the								
benefit will be applied.											
	FALL TERM: December		WINTER TERM: April 30								
	SPRING TERM: June	e 30	SUMMER TERM: August	31							
DECLARATION											
I am applyingfor a waiver of	tuition fees for the above	e course(s) and t	erm under the Waiver of Tuiti	on Fees f	or Se	nior	 Citiz	ens F	Policy		
6.06. I am a person 65 years	of age or older.										
I understand that this waive related fees.	er is for tuition only and	d that I am respo	onsible for the payment of a	any relate	ed stu	uder	ıt an	d oth	ner		
Signature			Date (dd/mm/yyyy)								
		,									
Please return completed	form to:										
Student Central	University of Saskatchewa	an ■ Administration	Building ■ 105 Administration P	lace ■ Sas	katoor	า, SK	S7N	 I 5A2	■ Cana		
			Tel: (306) 966-1212 ■ Fax:	(306) 966-	-6730	■ Em	ail: a	skus@	usask.		

FOR OFFICE USE ONLY							
Student Accounts and Treasury Approval	Student Central Approval						
Document Reference	Document Date	Verified Eligibility ☐ Yes ☐ No					
Processed by	SCO Signature						