PRATT INSTITUTE GRADUATE STUDENT APPLICATION FEE WAIVER REQUEST FORM

Today's Date:		D.O.B		
Logal Nama				
Legal Name	Last	First	Middle	_
Preferred Name				
	Last	First	Middle	
Mailing Address				
Email Address				
Country of Citizer	nship			
To which graduat	e program are yo	ou applying?		
Please check all	that apply:			
=	Citizen or Perma			
		ollege or university (School n i (Pratt ID:)	ame:	_)
		itt ID:)		
Please select the	fee waiver that a	applies to your circumstances	S :	
Financial Ha	rdship Fee Waive	ər		
Special Prog	rams Fee Waive	r		
Outside Orga	anization Fee Wa	uiver		
Military Fee	Waiver			
Expedited Ap	oplication Proces	s for Pratt Students Fee Wai	ver	
	Staff Fee Waiver n∶only valid for st	tudents who are reapplying a	fter the 2023-2024 cycle	
By signing belo	w, I certify all in	formation is true and corre	ect to the best of my knowledge	
Today's Date:				
Applicant signa	ture:			
Print name:				
Please scan a	nd email this co	mpleted form along wtih the	he corresponding documentation	as

*Please send all required documentation in **one email**, or your request will not be considered.

detailed on our fee waiver page (www.pratt.edu/graduate-fee-waiver) to: apphelp@pratt.edu