



**PART 1: INSTRUCTIONAL FEE WAIVER FOR STUDENTS WHO QUALIFY FOR FREE MEALS**

To be considered for a fee waiver, complete this form and return it to your school’s office. **This waiver applies to classroom/academic fees payable to Vandalia-Butler City Schools only.** *Approval of instructional fee waiver is based on requirements for Free School Meals.*

- Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **Vandalia-Butler City Schools Student Fee Program.** I understand that if any of my children do not qualify for free school meals, I am responsible to pay for instructional school fees for the 2021-2022 school year. Nonpayment will result in withholding of student grades, credits, graduation diplomas or transcripts.

**PART 2: SHARING OF INFORMATION WITH HIGH SCHOOL PROGRAMS**

*Approval is based on requirements for Free and Reduced School Meals.*

- Yes! I **DO** want school officials to share my meal benefits information from my Free and Reduced Price School Meals Application with **Vandalia-Butler High School Guidance Department for Testing Fee Waivers for 2021-2022.**
- Yes! I **DO** want school officials to share my meal benefits information from my Free and Reduced Price School Meals Application with **Vandalia-Butler High School Guidance Department for Student College Applications for 2021-2022.**

**PRINT STUDENT(S) INFORMATION**

<u>NAME</u>	<u>GRADE</u>	<u>SCHOOL</u>

**Please complete this section:**

**Parent / Guardian name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

***Please sign*** \_\_\_\_\_

**Signature of Parent/Guardian**

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**FOR SCHOOL USE ONLY**

**DO NOT WRITE BELOW THIS LINE**

Approved by Food Service \_\_\_\_\_

Disapproved by Food Service \_\_\_\_\_

Reason: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Food Service Representative

This institution is an equal opportunity provider.