

**Department of Justice Studies
Criminal Justice M.S.
Forensic Studies M.S.**

Supplemental Tuition Waiver Application

Name _____
(Last) (First) (M.I.)

Address _____

Phone () _____ Email _____

University Identification Number (UIN) _____

Term Applying for: Fall – deadline May 1 _____

Spring – deadline October 1 _____

Summer – deadline March 1 _____

Student Status:

Full time _____ Part time _____

In State _____ or Out of State _____ student

Current GPA: _____

Employment Status:

Unemployed _____ Employed full time _____ Employed part time _____

Please provide on a separate page a personal financial narrative that explains your need for the tuition waiver.

Submit Graduate Tuition Waiver Application, Supplemental Department Application and Narrative to:

Office of Graduate Studies

FGCU

10501 FGCU Blvd.

Ft. Myers, FL, 33965

Phone (239) 590-7988

FAX (239) 590-7843
