



## SENIOR CITIZEN WAIVER REQUEST

Age 62 or Older

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Permanent Address: Street

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City State Zip Code

I request to be registered as a senior citizen and apply for a waiver under the following conditions as prescribed by Connecticut General Statutes 10a-99-d-3 and am age sixty two or older as of the first day of the semester.

Please check your student status below:

**Part – Time Student**

Tuition and State University Fees are waived for any Connecticut resident presenting evidence of being 62 years of age or older who registers as a part –time student. Registration is available on a space available basis. **The Registration Fee, and if applicable, any course or program fees are still charged and due.** Visit [www.ccsu.edu/bursar](http://www.ccsu.edu/bursar) for details.

**Full –Time Student**

Tuition and State University Fees are waived for any Connecticut resident presenting evidence of being 62 years of age or older who has been accepted for full-time admission and is enrolled in a degree-granting program. **The University General Fee, Student Activity Fee, Transportation Fee and, if applicable, any course or program fees, are still charged and due.** Visit [www.ccsu.edu/bursar](http://www.ccsu.edu/bursar) for details.

**This waiver request is a one-time request. Once approved, the waiver will automatically apply to all future terms. A waiver request form does not need to be submitted or approved for future registration terms.**

I understand that I am responsible for any financial obligations that may occur as a result of failing to meet the stated criteria for eligibility. Attached are Documentation of Residency and Age.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

**This student meets the requirements for registration with the senior citizen (62+) waiver.**

\_\_\_\_\_  
Registrar's Signature

\_\_\_\_\_  
Date

**Please complete this form and return to the Office of the Registrar,  
Willard DiLoreto Room D202,  
1615 Stanley Street, New Britain, CT 06050  
Fax: 860-832-2250 or Email: [regstaff@ccsu.edu](mailto:regstaff@ccsu.edu)**