



Please Check One:	
New Student	<input type="radio"/>
Continuing Student	<input type="radio"/>

## Senior Citizen Waiver Form

Name: \_\_\_\_\_ ID: 855 \_\_\_\_\_  
Please Print Last Name First Name

WPUNJ E-mail: \_\_\_\_\_@student.wpunj.edu

Please indicate desired semester and year to apply waiver:

- Fall \_\_\_\_\_       Winter \_\_\_\_\_  
 Spring \_\_\_\_\_       Summer \_\_\_\_\_

**Criteria:** Senior citizens who wish to take courses on a tuition-free, space available basis. An application fee is **not required** for senior citizens.

### Eligibility:

- New Jersey resident
- At least 65 years or older (copy of NJ driver’s license needed as proof of age)
- Apply and submit an application, every semester, as one of the following:
  - Non-Degree
  - Second Degree
  - Matriculated Graduate degree
  - Matriculated Undergraduate degree
  - Certification program

### Registration/Tuition:

- Registration is permitted on the first day of the semester/session
- Enrollment is limited to available classroom space
- If you register for a course before the first day of the semester/session, you are responsible for full payment of the course(s)
- Student is not permitted to get an override into classes that are closed
- Student is only liable for payment of fees.
- All previous balances must be paid in full before the senior citizen waiver can be applied

### **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR WAIVER**

For questions, please contact Student Accounts at [studentaccounts@wpunj.edu](mailto:studentaccounts@wpunj.edu)

**By signing this form, I understand that the waiver will not be approved unless all documentation is submitted and I have met all other requirements.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date