UCLA Fee Reduction Request

INSTRUCTIONS

Certain qualified undergraduate students, when properly approved by the dean of their College or school for enrollment in 10 units or less, may be eligible for a one-half reduction in tuition (and nonresident supplemental tuition, when applicable). Consult with the College or school for eligibility requirements. See **current term fees** and **reduced fee program** information on the Registrar website.

Complete this form and file it with the appropriate College or school office, with any required verification, by Friday of the second week of the term. **The student must be enrolled in 10 or fewer units by Friday of the third week of classes** or be billed for excess units. If the student enrolls in or receives credit for more units than approved, a bill will be issued for repayment of the amount by which fees were reduced. This deadline should not be confused with the fourth-week drop deadline for nonimpacted courses.

Academic Advancement Program (AAP), 1209 Campbell Hall
College Academic Counseling (CAC), A316 Murphy Hall
College Honors Program, A311 Murphy Hall
Student Athletics, Morgan Center
Arts and Architecture, 2200 Broad Art Center
Education and Information Studies, 2320 Moore Hall
Engineering and Applied Science, 6426 Boelter Hall
Music, 1642 Schoenberg Music Building
Nursing, 2-137 Factor Building
Public Affairs, 3357 Public Affairs Building
Theater, Film, and Television, 103 East Melnitz Building

STUDENT INFORMATION Print clearly.

Full Name (Last, First Middle)			9-Digit UCLA ID
Current Mailing Address – Street			E-mail Address
City	State	ZIP/Postal Code	Province (Canada only)
Country	Telephone	Major	

College/School

☐ Letters and Science ☐ Arts and Architecture ☐ Education and Information Studies ☐ Engineering and Applied Science
☐ Music ☐ Nursing ☐ Public Affairs ☐ Theater, Film, and Television

REDUCTION REQUEST Check one or both boxes, as appropriate. Mark all terms for which reductions are requested.

☐ **Tuition Reduction**

Fall 20_____ Winter 20_____ Spring 20_____

☐ **Nonresident Supplemental Tuition Reduction**

Fall 20_____ Winter 20_____ Spring 20_____

REASON FOR REQUEST

PROPOSED STUDY LIST

1

2

3

I have read the procedures shown above. I understand that I will be billed for additional fees if I subsequently enroll in or receive credit for more units than approved by this request. I certify that I am or will be enrolled in 10 units or less as of Friday of the third week of classes.

Student Signature Date

COLLEGE/SCHOOL USE ONLY

ACTION BY COLLEGE/SCHOOL Check a box on one or both lines, as appropriate.

Signature Date

☐ **Approved** ☐ **Denied** **Tuition Reduction**

Fall 20_____ Winter 20_____ Spring 20_____

☐ **Approved** ☐ **Denied** **Nonresident Supplemental Tuition Reduction**

Fall 20_____ Winter 20_____ Spring 20_____

REGISTRAR'S OFFICE USE ONLY

	FALL	WINTER	SPRING
ENROLLED UNITS			
VERIFIED			
DEFERRED/REFUND			
CODE INPUT DATE			