

FAFSA WAIVER

PLEASE USE ONLY BLACK OR
BLUE INK TO COMPLETE.



South Carolina Lottery Tuition Assistance Program Application to Waive FAFSA Requirement

_____	_____	_____	_____
Last Name	First Name	Middle Initial	Social Security Number
_____		_____	_____
Street		City	State Zip
_____	_____	_____	_____
Phone (Cell)		Phone (Home)	

I request a waiver to the Lottery Tuition Assistance eligibility requirement relating to the submission of the Free Application for Federal Student Aid (FAFSA) for the following reason (check all that apply):

- **I am a high school student enrolled in a dual enrollment program.** X

By not submitting the FAFSA, I acknowledge that:

- I will not be eligible to receive other Title IV aid, which includes the Pell Grant, Federal Supplemental Educational Opportunity Grant, Perkins Loan, Direct Stafford Loans, Federal Work Study and the SC Need-based Grant. Also, I will not be able to participate in other loan programs offered by the South Carolina Student Loan Corporation or other state assistance programs that require the submission of the FAFSA. Further, I understand that neither the state of South Carolina nor the institution can be held liable for any amount of federal or state funds that I forgo by signing this waiver.
- I do not owe a refund or repayment of a state grant, Pell Grant, or Supplemental Education Opportunity Grant, and I am not in default on a loan under the Federal Perkins Loan, Direct Federal Stafford Loan, William D. Ford Federal Loan, Plus Loan, or any state loans. I understand that the institution will verify this.

The provided information is correct and if any of the information is false, I understand participation in the Lottery Tuition Assistance Program will be canceled and reimbursement of Lottery Tuition Assistance funds will be required. Further, I understand that if I have attempted to obtain, or have obtained Lottery Tuition Assistance through means of a willfully false statement or failure to reveal any material fact, condition, or circumstances affecting eligibility, I can be subject to the college/university's code of student conduct and applicable civil or criminal penalties.

This waiver is not valid until this form is completed and submitted with the PACE/ Dual Enrollment Application.

_____	_____
Student Signature	Date
_____	_____
Financial Aid Signature	Date
_____	_____
Approved	Not Approved