

# MANSFIELD UNIVERSITY

**Enrollment Services**, 224 South Hall, 71 South Academy St, Mansfield, PA 16933  
**SENIOR CITIZEN TUITION WAIVER - 0146**

DATE \_\_\_\_\_

Course Name, #, Sec. \_\_\_\_\_ Semester \_\_\_\_\_

Course Name, #, Sec. \_\_\_\_\_ Total Credit \_\_\_\_\_

Course Name, #, Sec. \_\_\_\_\_ Total \_\_\_\_\_

\* I would like to take the above course(s) for credit and/or auditing purposes only.

\* I am a legal resident of the Commonwealth of PA.

\* I am receiving Social Security Retirement benefits and I am over 62 years of age.

\_\_\_\_\_  
Name - please print

\_\_\_\_\_  
Signature

\_\_\_\_\_  
S.S. or Student ID #

Verification: First time waiver applicants must attach eligibility requirements :

\_\_\_\_\_ Copy of monthly check or Direct Deposit document

\_\_\_\_\_ Statement from the Social Security office

\_\_\_\_\_ Copy of Pennsylvania Driver's License

\_\_\_\_\_  
Date Rec'd: \_\_\_\_\_

\_\_\_\_\_  
Date Posted: \_\_\_\_\_

Mail completed form and documentation to : **Enrollment Services**  
224 South Hall  
71 S Academy St  
Mansfield, PA 16933