

Paw Paw Community Unit School District #271

P.O. Box 508 ● 511 Chapman Street ● Paw Paw, IL 61353-0508 District Phone (815) 627-2841 ● School Office (815) 627-2671 www.2paws.net

APPLICATION FOR FEE WAIVER

To be submitted to the Building Principal

Student's Name (please print)	School
As the parent/guardian of the above n	amed student, I request a waiver of school fees.
I am asking for a waiver of school fees	because: (please check at least one box)
of The Illinois Public Aid Code (evidence of participation is end The above named student curr breakfast eligibility guidelines e National School Lunch Act, 42 U While none of the above two s	ently lives in a household that meets the free lunch or established by the federal government pursuant to the
Supplying false information to obtain a that the statements made herein are t	a fee waiver is a Class 4 felony (720 ILCS 5/17-6). I attest rue and correct.
Parent/Guardian (please print)	Address
 Signature	

ADOPTED: December 14, 2009 4:140-E1