



**WINSTON-SALEM**  
STATE UNIVERSITY

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Office of the Registrar  
202 Thompson Center • 601 S Martin Luther King Jr. Drive  
Winston-Salem, North Carolina 27110  
Phone: 336-750-3330 • Fax: 336-750-3332

### Tuition Surcharge Waiver Request Form

**Student Name:** \_\_\_\_\_ **Banner ID#** \_\_\_\_\_

**Local Address:** \_\_\_\_\_

\_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Major(s):** \_\_\_\_\_

**Basis for Waiver Request:**

The following four (4) waiver categories constitute the only grounds for waiver of the tuition surcharge. Check one.

**Military Service Obligation**

**Short-term or Long-term Disability**

**Serious Medical Debilitation**

**Other Extraordinary Hardship**

Signature (*required*) \_\_\_\_\_ Date \_\_\_\_\_

**Documentation Requirements:**

A statement explaining why you are requesting a waiver and the appropriate documentation must be attached to this request for the request to be considered.

**Submit this completed form to the Office of the Registrar at the above address within 10 days.**