

REQUEST FOR SENIOR CITIZEN WAIVER AND REGISTRATION

| Name | | PTC ID# | |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Major | | Check here to have phone number changed on your record | |
| | | Check here to have phone number changed on your record | |
| Term of registration | | Email address: | |
| Requested courses (limit | 12 credit hours): | | |
| (1) Course | | Alternate CRN (if first section is full) | |
| (2) Course | | | |
| (3) Course | | | |
| (4) Course | | Alternate CRN (if first section is full) | |
| You must be a leg | ou must meet all of the folgest 60 years of age. al resident of South Carol employed full time. | _ | |
| Senior citizens must comp tuition is not covered by | | nior citizen waiver will only be used to the extent | |
| Senior citizens who qualif and register during regula | | us, will not require a waiver may enroll in any program | |
| aid, must be coded as a ca | areer development stude | not complete a FAFSA, or do not qualify for any grant nt and may register beginning on the first day of class he late registration fee will not apply in this situation. | |
| The base tuition will be w will not be covered by the | | nly. Fees, books, supplies or miscellaneous expenses | |
| Completion of this form of registration is the only was | J | in a class. Payment of the fee at the time of | |
| A senior citizen waiver ca | n only be used one time բ | per course. | |
| | • | ons outlined above to receive free tuition. I understand vailable basis for certain courses. | |
| Student Signature | | Date | |