



LAFAYETTE
PARISH SCHOOL SYSTEM

Hardship Waiver Request

A student or his/her parent or legal guardian may request and receive a waiver of payment of the student athletic insurance fee due to economic hardship. Completed waivers and the corresponding documentation must be submitted to your student's coach for the sport they are participating in. The form must be completed yearly during enrollment, registration, or orientation.

Student Information

Name	School	Grade/Sport

Economic Hardship

A student or his/her parent or legal guardian may request and receive a waiver of payment of the athletic insurance fee due to economic hardship. Please indicate which applies and provide the corresponding documentation with your request.

_____ Parent/Guardian is receiving unemployment benefits or public assistance including Temporary Assistance for Needy Families, Supplemental Nutrition Assistance Program, Supplemental Security Income, or Medicaid. **(Documentation Required)**

_____ Child is in foster care. **(Documentation Required)**

_____ Child is homeless. **(Must have documentation from Homeless Liaison.)**

_____ Parent/Guardian is serving in or within the previous year has served in active military service. **(Documentation Required)**

_____ Child is an emancipated minor. **(Documentation Required)**

Guardian Contact Information

Guardian

Name _____

Phone _____ Alternate Phone # _____

*****Please return to your school principal.*****

Information below must be completed by school personnel only.

Document Received by Date Received _____ Decision Received: _____

ECONOMIC HARDSHIP WAIVER DECISION

Decision on waiver request (check one):

_____ Waiver Approved _____ Waiver Not Approved

Explanation if waiver was not approved: _____

Administrator Signature _____ Date _____