Form to Request Waiver of CNE Application Fee

Name of program: ________________________________________________________________

Name of applicant: _____________________________________________________________

1. Are you a faculty member, staff member, or student of the CON?
   a. Yes, continue to question 2.
   b. No, a fee waiver is not applicable.

2. Will the program be presented in space inside Procter Hall or UC East?
   a. Yes, submit this form for consideration of a fee waiver.
   b. No, continue to question 3.

3. Is this program being presented on behalf of a CON program or unit? For example, presentations to college alumni, college-sponsored conference, and Nightingale event.
   a. Yes, submit this form for consideration of a fee waiver.
   b. No, continue to question 4.

4. Describe the rationale for the request for waiver of the CNE application fee. Include in the description, the alignment of this program to the college strategic goals.

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