

Dear Fayette County Public Schools Families:

Our school district is committed to providing the very best possible education to each student, regardless of his or her family income level. In order to ensure that financial concerns are not a barrier, students who qualify for free or reduced lunch through direct certification or income guidelines are also exempt from paying instructional fees such as:

1. Charges or deposits collected by a school for use of school property, including but not limited to: locks, towels, laboratory equipment, and special workbooks.
2. Charges for field trips, any portion of which falls within the school day.
3. Charges or deposits for uniforms or equipment related to intramural sports, music, or fine arts programs.
4. Special supplies or fees required for a particular class.
5. Graduation fees required for participation.
6. Special education fees.
7. School records fees.
8. School health service fees.
9. General activities fees.
10. Vocational education fees.
11. Textbook rental fees.
12. Any other fees not exempt under school board policy or procedure.

To apply for a waiver of fees, please fill out, sign the application, and return the completed document to the principal's office in your child's school.

Thank you for your attention to this important matter. Should you have any further questions, please contact the principal at your child's school.

**AN EQUAL OPPORTUNITY SCHOOL DISTRICT**

Board of Education: Melissa Bacon, Chair • Raymond Daniels, Vice Chair • Douglas Barnett • Daryl Love • Stephanie Spires

Superintendent Emmanuel Caulk

701 East Main Street, Lexington, Kentucky 40502 • Phone: 859.381.4100 • [www.fcps.net](http://www.fcps.net)

**Mailing Address:** 1126 Russell Cave Rd., Lexington, Kentucky 40505

# INSTRUCTIONAL FEE WAIVER REQUEST FORM

PLEASE RETURN THIS FORM TO YOUR CHILD'S SCHOOL OFFICE

The following student(s) attending \_\_\_\_\_ is a dependent living in my household and is eligible for free or reduced-price lunch and I hereby request waiver for required instructional fees.

I authorize FCPS Child Nutrition to share my student's meal status with the school's designee and teacher of record so that my child can benefit from Fee-Waiver funds.

Student's Name	Date of Birth	Grade

Parent/Guardian Signature \_\_\_\_\_

Student Name \_\_\_\_\_ Date \_\_\_\_\_



## VOLUNTARY INSTRUCTIONAL FEE WAIVER EXCEPTION FORM

I understand that, if my child qualifies for instructional fee waiver and I have signed and returned the Fee Waiver Request Form, I am NOT required to pay, donate or contribute any portion of an eligible school fee (including fees charged for school day field trips). However, if I sign this exception form, I am choosing, from time to time, to pay all or part of a fee. In order to make a voluntary contribution, I must sign this form.

Parent/Guardian Signature \_\_\_\_\_

Student Name \_\_\_\_\_ Date \_\_\_\_\_

### SCHOOL OFFICE USE ONLY

Your request for instructional fee waiver for \_\_\_\_\_ has been  
\_\_\_ Approved  
\_\_\_ Denied due to \_\_\_\_\_

If your application has been disapproved and you wish to discuss any concerns about the decision, you may call \_\_\_\_\_ to request a meeting.

\_\_\_\_\_  
Principal or Designee

\_\_\_\_\_  
Date