

**Twilight School  
Tuition Reduction Request**

Home School: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Student Identification #: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

***Verification of Eligibility & Recommendation***

*A twilight student may receive a tuition reduction to \$50 for one course.*

*Eligibility for a tuition reduction is based solely on the student's family receiving public assistance. Examples include: receipt of public assistance checks, food stamps, medical assistance, or other emergency assistance provided by the Department of Social Services.*

***Parents/guardians must show proof of receiving assistance in order to qualify for a tuition reduction.***

Temporary Cash Assistance (TCA)  
Medical Assistance/MD Children's Health Program  
Food Stamp Verification  
Emergency Assistance

Independence Card (EBT Card)  
Public Housing Verification  
Women, Infants, Children (WIC) Program  
**FARMS**

*(Photocopy proof of assistance and attach to this form)*

I recommend the applicant be:      **APPROVED**      **NOT APPROVED**

Signature of Verifying School Personnel: \_\_\_\_\_

Date: \_\_\_\_\_