



OFFICE OF THE REGISTRAR
 POST OFFICE BOX 8104 ✦ 300 COLLEGE STREET, NORTHEAST
 ORANGEBURG, SC 29117-0001 ✦ (803) 536-7185 ✦
 FAX: (803) 536-8602

REQUEST FOR TUITION FREE ATTENDANCE FOR SENIOR CITIZENS

In accordance with the South Carolina Code of Laws, **SECTION 59-111-320**, 2016, as amended authorizes state-supported colleges and universities, and institutions under the jurisdiction of the State Board for Technical and Comprehensive Education, are authorized to permit legal residents of South Carolina who have attained the age of sixty to attend classes for credit or noncredit purposes on a space available basis without the required payment of tuition, if these persons meet admission and other standards deemed appropriate by the college, university, or institution.

A senior citizen (60 years of age or older) who is a resident of South Carolina can take credit courses (6 hours maximum) on a space available basis without paying tuition during the Spring and Fall Semesters. The Senior Citizen waiver does not apply during the Summer Semester. Senior citizens may register for classes under the free tuition provision on the first day of class for the Spring and Fall Semesters. After completion of the admission process, a Senior Citizen Waiver form may be obtained from the Registrar's Office or the Web. Those seniors that are admitted in a degree seeking program can only take courses on that level. All students admitted as a "Special or Undecided" students may take any course on any level up to 6 hours during the Spring and Fall Semesters.

I request permission to attend South Carolina State University on a tuition free basis during the Spring or Fall semester of 20____.

As a student with at least 6 hours, you ***must*** waive or enroll in the mandatory student health insurance by the established deadline listed on the Current University Calendar each semester of enrollment. This can be done through Bulldog Connection or at www.studentinsurance.com.

It is my desire to enroll in the follow courses(s) during the semester for which I am applying:

CRN	Course	Course Title

In connection with this request, I certify that I am at least 60 years of age.

I understand that the approval of this request is dependent upon my meeting Admission standards deemed appropriate by the University, that this waiver is restricted to 6 hours and upon the availability of space.

I further understand that the South Carolina Code of Laws, **SECTION 59-111-370** provides that any applicant who willfully misrepresents his/her eligibility for the tuition benefits provided for under this act, or any person who knowingly aids or abets such applicant in misrepresenting his/her eligibility for such benefits, shall be deemed guilty of a misdemeanor and upon conviction shall be fined more than one hundred dollars or imprisoned for not more than thirty days.

 Student

 Date

PLEASE MAINTAIN A COPY FOR YOUR RECORDS.

Revised 06/09/2017

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Witness

Date

Requesting Tuition-Free Attendance, the applicant _____
Student Name (please print)

Student ID _____ meets or does not meet the admission requirements and standard of the University. Sufficient space is available to accommodate the application the applicant in the classes to which enrollment is desired during the Late Registration Period.

APPROVED: _____
Provost Date

APPROVED: _____
Vice President for Finance and Management Date

APPROVED: _____
Registrar Date