UNM SCHOOL of LAW

UNM School of Law
Office of Admissions
MSC11 6070

1 University of New Mexico
Albuquerque, NM 87106
Fax: 505-277-9958

APPLICATION FEE WAIVER FORM

Directions: Please fill out form completely and **submit with a copy of your most recent federal tax return**. *Waiver requests with incomplete or omitted information may not be accepted*.

Name _____
　　　　　　　　Last　　　　　　　　　　　　　*First*　　　　　　　　　　　*Middle*

Address _____
　　　　　　Number and Street　　　　　　　　*City, State*　　　　　　　　　*Zip*

Email address_____

Are you currently a student? __Yes __ No   If yes, please provide the following information:

| __ Undergraduate student | __ Part-time | Number of credit hours _____ |
| __ Graduate student | __ Full-time | Tuition/Fees $_____ |

Name of institution _____

Amount of financial aid awarded to you this year (include aid from all sources including loans, grants, fellowships, scholarships, work study, etc.) $ _____　　　　Do you have a Pell Grant? __ Yes __ No

If married, is spouse a full-time student? __ Yes __No　　　　Degree program _____

Are you currently working? __ Yes __ No If yes, occupation _____

Do you have legal dependants? __ Yes __ No If yes, Number of dependants _____ Ages _____

	Applicant	Spouse
Total Earnings before taxes from all sources for you (and your spouse, if applicable) during the last 12 months	$ _____	$ _____

Total untaxed income during the last 12 months:

	Applicant	Spouse
Social Security benefits	$ _____	$ _____
Aid to Families with Dependent Children (AFDC or ADC)	$ _____	$ _____
Child support received	$ _____	$ _____
Other public assistance _____	$ _____	$ _____

Total amount of cash available to you (and your spouse, if applicable) either on hand, or in the bank $ _____

Total present net value of all applicant's (and spouse's, if applicable) stocks, bonds, automobiles, other property and financial interest of any kind　$ _____

Housing (Applicant and spouse, if applicable)
Live with parents __ Yes __ No   If yes, monthly payment $ _____
Rent　　　　　__ Yes __ No If yes, monthly payment $ _____
Own a home　　__ Yes __No If yes, monthly mortgage payment $ _____ current value $ _____

Total current debt

	Student Loans	Credit Cards	Other Loans	Unpaid/Medical	Total
Applicant	$ _____	$ _____	$ _____	$ _____	$ _____
Spouse, if applicable	$ _____	$ _____	$ _____	$ _____	$ _____

Parent Information (to be completed by candidate)
Father's (or guardian's) name _____ Employer _____
Occupation _____ Approximate annual salary $ _____
Mother's (or guardian's) name _____ Employer _____
Occupation _____ Approximate annual salary $ _____
How many children, not including yourself, do your parents support?_____

CERTIFICATION
I certify that the above information is accurate and complete to the best of my knowledge.
Signature _____ **Date** _____