

Student Life & Leadership College Service Fee Waiver

MUST BE APPROVED BY STUDENT LIFE & LEADERSHIP

Please type or print all responses. Submit this to the Student Life & Leadership Department (SLL) for signatures and approval. Please be advised that once approved for a waiver, you will not be eligible for any programs, services, giveaways, or events that are paid for by the College Service Fee during the semester in which the waiver is active. No exceptions will be made. For more information please contact (562) 908-3427 or studentlife@riohondo.edu.

Semester	Year	Waiver Amount	
			\$7 - Fall/Spring
			\$4 - Intersession
First Name	Last Name		
Student Rio ID	Student Phone Number	Student Email Addr	ess
Street Address	City	Zip Code	State Abbreviation
	Terms and (Conditions	
eligible for any of the responsibility for obt there might be servi- services. I understar	nereby acknowledge and understand the services and programs that are providation about what the ces or events created after I sign my wand that once I sign a waiver, it cannot be ting that I do not want to participate in the	led by the College Service lose programs and service laiver, and that I am not eli- e reversed for that semest	e Fee. I understand that it is my es are. I also understand that gible for those programs and ter. I understand that by signing
	ree to the terms and conditions of this on that by providing my signature that this	• •	es are true to the best of my
Student Signature			Date Signed
Office Use Only:	This must be signed by SLL Staff. Admissions and Records staff may verify ID from 6:30pm-8pm, and the form must be provided to SLL for final signatures. Original Copy is Submitted to Cashier. Copy is kept on file with SLL.		
Staff Signature	Ex	xt.	Date Approved