## **CALIFORNIA INSTITUTE OF TECHNOLOGY**

M/C 230-87, Room 230 Center for Student Services, gradofc@caltech.edu

## **Tuition Waiver Petition**

UID		
Last Name	First Name	-
Option	Year Entered Caltech	_
Current Degree	Expected Completion Date	-
Email		

Students are responsible for obtaining all of the necessary recommendations prior to submitting the final petition for approval to the Office of the Dean of Graduate Studies. If additional documentation is specified, please attach relevant materials to the petition prior to submission.

Graduate students in their final term of a doctoral program may be eligible for a tuition waiver based on the following criteria:

\*The student may not receive a stipend during the term the tuition waiver is requested \*The student must schedule his or her defense prior to the third Friday of the term \*The student must be enrolled for a minimum of 36 research units

I hereby request a tuition waiver for:

	Term (Please select one):	Fall	Winter	Spring	
	Academic Year				
	Defense date				
		Date	Stud	ent Signature	
D F	Recommended				
	Not Recommended				
		Date	Opti	on Representative Signature	
Aftei	r obtaining the signatures above, su	ıbmit to Gradofc@c	altech.edu for app	proval by the Graduate Dean.	
	Approved Not Approved				
		Date	Dear	n of Graduate Studies Signature	!

**Revised September 2021**