



## 221 Tunica Drive West Marksville, LA. 71351 Karen L. Tutor, Superintendent Thelma J. Prater, Assistant Superintendent

## 2024-25 Student Fee Waiver Request

(submit to principal or hi s/her designee)

Student's Name	Grade	, is currently in Foster Care.
	cular and co-curricular activities i status (per LPSS Policy File: JS,	
DCFS Case Worker/Foster	Parent(s)	(Print Full Name)
Signature		
*********	*************	**************
	The Fee Waiver Requ	est is:
Denied	Approved (Full Waiver)	Approved/Reduction in Fees
Principal/Designee	Signature	
*********	*********	**************

A written decision on the waiver request shall be rendered by the school principal or his/her designee within (5) school days of the date of receipt of the request. Should the initial request for a waiver be denied by the school principal or his/her designee, a written appeal may be made to the Superintendent or his/her designee, who shall respond to the appeal in writing within (5) school days of the receipt of the appeal.