

## ADDITIONAL FEE WAIVERS/REDUCTIONS—PERMISSION TO SHARE INFO

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Dear Parent/Guardian:

If your student qualifies for free or reduced priced school meals, they will also qualify for some fee waivers and reductions. However, **we must have your permission to share your Free and Reduced Price School Meals application status with our Guidance Office in order for your student to have access to these benefits. Sending in this form will not change whether your children get free or reduced price meals.**

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Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **the Roncalli Guidance Office for purposes of:**

- **ACT and SAT fee waivers (2 free ACT and 2 free SAT)**
- **SAT Question & Answer Review Service fee waiver**
- **College application fee waivers**
- **Advanced Placement (AP) exam fee reduction**
- **NCAA and NAIA fee waivers**
- **Need-based scholarship applications**

No, I **DO NOT** want information from my Free and Reduced Price School Meals Application shared with any of these programs.

**If you checked no, stop here. You do not have to complete or send in this form. Your information will not be shared.**

**If you checked yes to the box above, fill out the rest of this form. Your information will be shared only with the Roncalli Guidance Office.**

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

For more information, you may call Eileen Horan at (317)788-4099.

**Return this form to Eileen Horan at Roncalli High School 3300 Prague Rd. Indianapolis, IN 46227 or email to [ehoran@roncalli.org](mailto:ehoran@roncalli.org).**

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