



SOUTH SEATTLE COLLEGE

One of the Seattle Colleges

COMPASS test, Fee waiver, and Book Loan Program Form

South Seattle Community College, Running Start Program

Student Name: _____

SSCC Student ID# _____

Student address: _____

Student phone: _____

Student email: _____

I certify this student qualifies for free or reduced lunch:

High School Counselor signature: _____

Counselor's Name (please print): _____

Date: _____

High School & District: _____

Counselor's contact information: _____

This form is for use by Seattle Community Colleges to document fee waiver eligibility for:

- COMPASS testing fee (one waiver only)
- Book Loan program
- Mandatory fees associated with course enrollment through Running Start

Academic Year: _____

Approved by: _____ Date: _____ FAPC: _____