

Fee Waiver Request Denial Notification

Date: _____

To: _____

Subject: Fee Waiver Request Denial

Dear _____,

We have reviewed your recent request for a fee waiver submitted on _____. After careful consideration, we regret to inform you that your request has been denied. The decision is based on the following reason(s):

- _____
- _____

If you would like additional information regarding this decision, or if you believe there has been an error, please contact our office at _____.

Thank you for your understanding.

Sincerely,

Title/Position

Organization

Recipient Signature:

Date: