

**AFFIDAVIT IN SUPPORT OF FEE WAIVER REQUEST**

**Name:** \_\_\_\_\_

**Alien number:** \_\_\_\_\_

This affidavit is submitted in support of a fee waiver request for the following applications: \_\_\_\_\_

**Income and Assets**

**Monthly Expenses**

Monthly income: \_\_\_\_\_

Rent: \_\_\_\_\_

Assets: \_\_\_\_\_

Food: \_\_\_\_\_

Value of assets: \_\_\_\_\_

Clothing: \_\_\_\_\_

Public benefits received: \_\_\_\_\_

Telephone/ utilities: \_\_\_\_\_

\_\_\_\_\_

Transportation: \_\_\_\_\_

Other: \_\_\_\_\_

**Total:** \_\_\_\_\_

I, \_\_\_\_\_ hereby affirm that the information on this form is true and correct and that I am unable at this time to pay the required fee for the application(s) listed above. I respectfully request that this request for a fee waiver be granted.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date