

Technology Fee Waiver Petition

Date: [Insert Date]

To: [Recipient's Name]

[Department/Office Name]

[School/University Name]

[School/University Address]

Dear [Recipient's Name],

My name is [Your Name], and I am a [Your Year, e.g., sophomore] student at [School/University Name], pursuing a degree in [Your Major]. I am writing to formally request a waiver for the technology fee due to my disability.

I have been diagnosed with [Brief Description of Disability] which substantially limits my ability to [Explain how it impacts your educational experience]. As a result, the technology fee presents a financial burden that I am unable to manage alongside my other educational expenses.

While I am committed to my education and utilizing necessary technology, I kindly ask for your understanding and support in waiving this fee for me. I believe that this waiver will enable me to focus more on my studies without the added stress of financial constraints.

I have attached documentation from [Insert relevant sources, e.g., my doctor, counselor, etc.] to verify my disability and its impact on my academic efforts. I appreciate your consideration of my request and look forward to your positive response.

Thank you for your time and understanding.

Sincerely,

[Your Name]

[Your Student ID]

[Your Contact Information]