

Fee Waiver Approval

Date: [Insert Date]

To,
[Recipient's Name]
[Recipient's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

We are pleased to inform you that your request for a fee waiver has been approved. After careful consideration of your application and supporting documents, we believe that your circumstances warrant this decision.

The fee waiver applies to the following: [Specify Fees/Programs] and will be effective from [Effective Date] to [Expiration Date].

Please feel free to reach out to our office if you have any questions or require further assistance regarding the waiver.

Thank you for your application, and we wish you the best in your endeavors.

Sincerely,
[Your Name]
[Your Title]
[Your Organization]
[Contact Information]