

# Fee Waiver Application Denial Notice

Date: [Insert Date]

[Your Name]  
[Your Address]  
[City, State, Zip Code]

[Recipient's Name]  
[Institution/Organization Name]  
[Address]  
[City, State, Zip Code]

Dear [Recipient's Name],

Thank you for your recent application for a fee waiver. We appreciate your efforts to provide us with the necessary documentation regarding your financial circumstances.

After a thorough review of your application and the supporting documentation, we regret to inform you that your request for a fee waiver has been denied. The reason for this decision is primarily due to the evaluation of your reported assets, which exceeded our established threshold for eligibility.

We understand that this may be disappointing news. If you believe there have been any errors or if your financial situation has changed, you are welcome to submit an appeal along with any additional documentation that supports your case.

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

Sincerely,

[Your Name]  
[Your Position]  
[Institution/Organization Name]