



UC DAVIS Graduate School UC LEADS Fee Waiver Form

University of California, Leadership Excellence Through Advanced Degrees Program

Directions

- 1) Fill out the required information below and obtain the UCLEADS Director's signature.
- 2) Once this form is completed, make a photocopy for your records.
- 3) Send your completed form to the UC Davis academic department to which you are applying.

ATTN: Graduate Department Liaison
Department of _____
University of California, Davis
One Shields Avenue
Davis, CA 95616

Required Information

1) UC LEADS Scholar Name: _____

Undergraduate Major: _____

Institution: _____

2) Name of the UC Davis Department to which you are applying:

3) UC LEADS Director's Name: _____

Address: _____

Phone: _____

E-mail: _____

UC LEADS Director's Signature: _____

4) This form certifies that the above-named student is a participant in good standing or an alumna/alumnus of the UC LEADS Scholars Program at:

Note: Only completed forms will be processed.