**2024 ADVANCED DENTAL ADMISSION TEST**

**PARTIAL FEE WAIVER FINANCIAL INFORMATION FORM**

*In documented cases of severe financial hardship,* a limited number of partial feewaivers are available to ADAT candidates each calendar year (January through December). The partial fee waiver covers 50% of test fees and does not apply to any charges associated with rescheduling or canceling a test date or requesting a score report after the time of initial application. Partial fee waivers are granted on a first-come, first-served basis to eligible candidates who have submitted the required documents.

A candidate is eligible to request a partial fee waiver if each of the following criteria are met:

* First time ADAT candidate
* U.S. citizen or resident alien
* Demonstrated financial hardship
* Recipient of financial aid for dental school

Complete this form and acquire one of the documents outlined below. Email the form and document to adat@ada.org: Attention ADAT Partial Fee Waiver. You must include at least **one** of the following documents to be considered for a partial fee waiver.

* Financial aid award letter that shows a detailed breakdown of the grants and/or scholarships you are receiving– **the name of your school and** **your name must be visible on this document.** Screen captures of yourfinancial aid breakdown as shown on your school’s financial aid portal are also acceptable as long as the name of your school and your name are visible.
* Tax return (form 1040). If you are considered a dependent please submit your parent’s or legal guardian’s tax return form clearly indicating you as a dependent. Tax documents are only required if you are not receiving any need-based financial aid.

**Important Notes:**

* Please note that a limited number of partial fee waivers are available per testing cycle.
* Processing time is approximately 5-10 business days but may vary depending on volume of applicants. The influx of applicants in January may cause processing time to double in length during this month.
* Financial aid letters or tax documents must be dated within the past 18 months.
* Please include documentation that describes the necessary qualifications for any need-based grant, other than a Pell Grant.
* **Receiving loans is not an indication of financial need**, please see the second bullet for submitting tax documents if you receive loans and no other need-based financial aid.
* **DO NOT SUBMIT AN APPLICATION FOR THE ADAT BEFORE YOU ARE APPROVED OR DENIED A FEE WAIVER**

**2024 ADVANCED DENTAL ADMISSION TEST**

**PARTIAL FEE WAIVER FINANCIAL INFORMATION FORM**

**Click within the empty fields to enter information.**

**DENTPIN®:**

**Anticipated Resources for the Current Academic Year**

Enter zero if none; do not leave blank.

|  |  |
| --- | --- |
| Financial Aid Award (grants, scholarships, or loans) | $ |
| Examinee’s and/or Spouse’s Gross Earnings (before taxes) | $ |
| Other Resources | $ |

In 750 characters or less please provide a personal statement detailing the need for an ADAT Partial Fee Waiver.

Personal Statement:

**Signature:** **Date:**