California Community Colleges 2009-2010 Board of Governors Fee Waiver Application

This is an application to have your ENROLLMENT FEES WAIVED. This FEE WAIVER is for California residents only. If you need money to help with books, supplies, food, rent, transportation and other costs, please complete a FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) immediately. Contact the Financial Aid Office for more information. The FAFSA is available at www.fafsa.ed.gov or at the Financial Aid Office.

Students who are exempt from paying nonresident tuition under Education Code Section 68130.5 (AB 540) are NOT California residents. If you are NOT a California resident, you are not eligible for a fee waiver. Do not complete this application. You may apply for financial aid by completing the FAFSA.

Nar	ne:					Student ID # _							
	Last	First	/	Middle Initial									
Ema	ail (if available):					Telephone Nu	mber: (_)				
Hor	ne Address:					Date of Birth:			1		1		
	Street		City	Zip Co	ode								
Has	the Admissions o	r Registrar's Office	determine	ed that you ar	re a Califo	ornia resident?	?		Yes [א ב	lo		
IMP	PLEMENTATION OF	THE CALIFORNIA	DOMESTI	C PARTNER I	RIGHTS I	AND RESPONS	SIBILITI	ES A	CT				
The California Domestic Partner Rights and Responsibilities Act extends new rights, benefits, responsibilities and obligations to individuals in domestic partnerships registered with the California Secretary of State under Section 297 of the Family Code. If you are in a Registered Domestic Partnership (RDP), you will be treated as an Independent married student to determine eligibility for this Enrollment Fee Waiver and will need to provide income and household information for your domestic partner. If you are a dependent student and your parent is in a Registered Domestic Partnership, you will be treated the same as a student with married parents and income and household information will be required for the parent's domestic partner. Note: These provisions apply to state student financial aid ONLY, and not to federal student financial aid.													
Coo Ten	de? (Answer "Yes" mination of Domestion ou answered "Yes"	in a Registered Dor if you or your parent c Partnership with the to the question above ome and household 10, 11, 12	nt are sep e California ve treat the	arated from a a Secretary of e Registered [n Register State's O Domestic	red Domestic F ffice.) Partner as a s	Partner b D ` pouse.	out ha Yes You	ave NO No are rec	o FIL o Juired	L ED to i	a No	otice of
		☐ Single ☐ Ma	arried 🗖	Divorced 🖵	Separate	ed 🗖 Widowe	ed 🗖	Regis	stered D	omes	tic P	artne	rship
DEI	PENDENCY STATU	S											
The questions below will determine whether you are considered a Dependent student or Independent student for fee waiver eligibility and whether parental information is needed. If you answer "Yes" to ANY of the questions 1-10 below, you will be considered an INDEPENDENT student. If you answer "No" to all questions, you will be considered a Dependent student thereby reporting parental information and should continue with Question 11.													
1.	Were you born before	ore January 1, 1986?	(If "Yes,"	skip to questic	on 13)					- Y	'es		No
2.	•	u married or in a Regou are separated but to question 13.)	-			•	otice to o	dissoi		nersh			, if you No
3.	Are you a veteran of question 13)	of the U.S. Armed Fo	rces or cui	rrently serving	on active	duty for purpos	ses othe	r thar	_		If "Y 'es		skip to No
4.		en who receive more e/RDP) who receive							e 30, 20	010?		Yes,"	
5.	When you were ag court? (If "Yes," sh	le 13 or older, were the kip to question 13)	ooth your p	parents deceas	sed, were	you in foster o	care or v	vere y	you a d	•	dent ′es		d of the No
6.	As of today, are you (If "Yes," skip to que	u an emancipated mi estion 13)	nor as dete	ermined by a c	court in yo	our state of lega	al resider	nce?		ץ ב	'es		No
	·			1.1									

DE	DENDENCY STATUS (Continued)	_	_	_		_	_
	PENDENCY STATUS (Continued)	_	_	_	_	_	_
7.	As of today, are you in legal guardianship as determined by a court in your state of legal real (If "Yes," skip to question 13)	sidence?			Yes		No
8.	At any time on or after July 1, 2008, did your high school or school district homeles unaccompanied youth who was homeless? (If "Yes," skip to question 13)	ss liaiso	n detern	nine	that y Yes		vere an No
9.	At any time on or after July 1, 2008, did the director of an emergency shelter program funder and Urban Development determine that you were an unaccompanied youth who was home (If "Yes," skip to question 13)		U.S. De	epart	ment o		using No
10.	At any time on or after July 1, 2008, did the director of a runaway or homeless youth ba determine that you were an unaccompanied youth who was homeless or were self-sup (If "Yes," skip to question 13)					g hor	
• If you answered "Yes" to any of the questions 1 - 10, you are considered an INDEPENDENT student for enrollment fee waiver purposes and must provide income and household information about yourself (and your spouse or RDP if applicable). Skip to Question #13.							
• If	f you answered "No" to all questions 1 - 10, complete the following questions:						
11.	If your parent(s) or his/her RDP filed or will file a 2008 U.S. Income Tax Return, were you, as an exemption by either or both of your parents?	or will yo Will Not F			on thes	eir ta No	
12.	Do you live with one or both of your parent(s) and/or his/her RDP?	Yes 🗖	No				
	f you answered "No" to questions 1 - 10 and "Yes" to either question 11 or 12, you nformation about your PARENT(S)/RDP. Please answer questions for a DEPENDENT						
<u>s</u> a	f you answered "No" or "Parent(s) will not file" to question 11, and "No" to question 1. student aid except this enrollment fee waiver. You may answer questions as an INDE application, but please try to get your PARENT information and file a FAFSA so you aid. You cannot get other student aid without your parent(s') information.	PENDE	NT stud	ent d	on the	rest	of this
ME	THOD A ENROLLMENT FEE WAIVER						
13.	Are you (the student ONLY) currently receiving monthly cash assistance for yourself or any	y depend	ents fror	n:			
	TANF/CalWORKs?		Yes 🗆) N	lo		
	SSI/SSP (Supplemental Security Income/State Supplemental Program)?		Yes 🗆	1 N	lo		
	General Assistance?		Yes 🗆	1 N	lo		
14.	If you are a dependent student, are your parent(s)/RDP receiving monthly cash assistance a primary source of income?		ANF/Cal Yes □		RKs or lo	SSI	SSP as

• If you answered "Yes" to question 13 or 14 you are eligible for an ENROLLMENT FEE WAIVER. Sign the Certification at the end of this form. You are required to show current proof of benefits. Complete a FAFSA to be eligible for other financial aid opportunities.

METHOD B ENROLLMENT FEE WAIVER

15.	DEPENDENT STUDENT: How many persons are in your pare anyone who lives with your parent(s)/RDP and receives more the June 30, 2010.)	` '	
16.	INDEPENDENT STUDENT: How many persons are in your h lives with you and receives more than 50% of their support from	` -	•
17.	2008 Income Information		
	(Dependent students should not include their income information for Q 17 a and b below.) a. Adjusted Gross Income (If 2008 U.S. Income Tax	DEPENDENT STUDENT: PARENT(S)/ RDP INCOME ONLY	INDEPENDENT STUDENT: STUDENT (& SPOUSE'S/ RDP) INCOME
	Return was filed, enter the amount from Form 1040, line 37; 1040A, line 21; 1040EZ, line 4). b. All other income (Include ALL money received in 2008 that is not included in line (a) above (such as disability, child support, military living allowance,	\$	\$
	Workman's Compensation, untaxed pensions).	\$	\$
	TOTAL Income for 2008 (Sum of a + b)	\$	\$

The Financial Aid Office will review your income and let you know if you qualify for an ENROLLMENT FEE WAIVER under Method B. If you do not qualify using this simple method, you should file a FAFSA.

SPE	CIAL CLASSIFICATIONS ENROLLMENT FEE WAIVERS			
18.	Do you have certification from the CA Department of Veterans Affairs that you are eligible for a dependent' Submit certification.	s fee	waive Yes	No
19.	Do you have certification from the National Guard Adjutant General that you are eligible for a dependent's submit certification.	fee w	aiver? Yes	 No
20.	Are you eligible as a recipient of the Congressional Medal of Honor or as a child of a recipient? Submit documentation from the Department of Veterans Affairs.		Yes	No
21.	Are you eligible as a dependent of a victim of the September 11, 2001, terrorist attack? Submit documentation from the CA Victim Compensation and Government Claims Board.		Yes	No
22.	Are you eligible as a dependent of a deceased law enforcement/fire suppression personnel killed in the line Submit documentation from the public agency employer of record.	of d	uty? Yes	No
p	you answered "Yes" to any of the questions from 13-17, you are eligible for an ENROLLMEN erhaps other fee waivers or adjustments. Sign the Certification below. Contact the Financial Aiuestions.			

CERTIFICATION FOR ALL APPLICANTS: READ THIS STATEMENT AND SIGN BELOW

I hereby swear or affirm, under penalty of perjury, that all information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide proof of this information, which may include a copy of my and my spouse/registered domestic partner and/or my parent's/registered domestic partner's 2008 U.S. Income Tax Return(s). I also realize that any false statement or failure to give proof when asked may be cause for the denial, reduction, withdrawal, and/or repayment of my waiver. I authorize release of information regarding this application between the college, the college district, and the Chancellor's Office of the California Community Colleges.

, ,
I understand the following information (please check each box):
Federal and state financial aid programs are available to help with college costs (including enrollment fees, books & supplies, transportation and room and board expenses). By completing the FAFSA, additional financial assistance may be available in the form of Pell and other grants, work study and other aid.
I may apply for and receive financial assistance if I am enrolled, either full time or part time, in an eligible program of study (certificate, associate degree or transfer).
☐ Financial aid program information and application assistance is available in the college financial aid office.
Applicant's Signature Date Parent Signature (Dependent Students Only) Date
CALIFORNIA INFORMATION PRIVACY ACT
Practices Act of 1977 requires the following information be provided to financial aid applicants who are asked to supply information about themselves. The principal purpose for requesting information on this form is to determine your eligibility for financial aid. The Chancellor's Office policy and the policy of the community college to which you are applying for aid authorize maintenance of this information. Failure to provide such information will delay and may even prevent your receipt of financial assistance. This form's information may be transmitted to other state agencies and the federal government if required by law. Individuals have the right of access to records established from information furnished on this form as it pertains to them. The officials responsible for maintaining the information contained on this form are the financial aid administrators at the institutions to which you are applying for financial aid. The SSN may be used to verify your identity under record keeping systems established prior to January 1, 1975. If your college requires you to provide an SSN and you have questions, you should ask the financial aid officer at your college for further information. The Chancellor's Office and the California community colleges, in compliance with federal and state laws, do not discriminate on the basis of race, religion, color, national origin, gender, age, disability, medical condition, sexual orientation, domestic partnership or any other legally protected basis. Inquiries regarding these policies may be directed to the financial aid office of the college to which you are applying.
FOR OFFICE USE ONLY
□ BOGFW-A □ TANF/CalWORKs □ GA □ SSI/SSP □ BOGFW-C □ Dependent
Comments:
Certified by: