California Community Colleges 2008-2009 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 <u>www.fafsa.ed.gov</u> or at the Financial Aid Office.

Note: 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.

Name:				Student ID #			
Last	First		Middle Initial				
Email (if available)):			Telephone Number: (_)		
Home Address: _	Street	City	Zip Code	Date of Birth:	/	 _/	
Has the Admission	ons or Registrar's Of	ice determined that	at you are a California re	esident?		Yes ם	No

IMPLEMENTATION OF THE CALIFORNIA DOMESTIC PARTNER RIGHTS AND RESPONSIBILITIES ACT

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.

Are you or your parent in a Registered Domestic Partnership with the California Secretary of State under Section 297 of the Family	y Code?	(An	swer
"Yes" if you or your parent are separated from a Registered Domestic Partner but have NOT FILED a Notice of Termination of Dor	nestic P	artnei	rship
with the California Secretary of State's Office.)	l Yes		No

If you answered "Yes" to the question above treat the Registered Domestic Partner as a spouse. You are required to include your domestic partner's income and household information in Questions 3, 6, 7, 8, 9, 10, 11, 12.

Student Marital Status:		Single 🗖	Married 🗖	Divorced 🗖	Separated 🗖	Widowed 🗖	Registered Domestic Partnership
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DEPENDENCY STATUS

	1.	Were you born before January 1, 1985?		Yes		No
	2.	As of today, are you married or in a Registered Domestic Partnership (RDP)? (Answer "Yes" if you are separated but not filed a termination notice to dissolve partnership.)		livorce Yes		have No
	3.	Do you have children who receive more than half of their support from you, or other dependents who live with you (oth and spouse/RDP) who receive more than half of their support from you, now and through June 30, 2009?		an you Yes		ildren No
	4.	Are (a) both your parents deceased, or (b) are you (or were you until age 18) a ward/dependent of the court ?		Yes		No
		Are you a veteran of the U.S. Armed Forces or currently serving on active duty for purposes other than training?	_	Yes	_	No
а	nd m f you	answered "Yes" to any of the questions 1 - 5, you are considered an INDEPENDENT student for enrollment f ust provide income and household information about yourself (and your spouse or RDP if applicable). Skip to answered "No" to all questions 1 - 5, complete the following questions:	Ques	stion #	*8. *	
	6.	If your parent(s) or his/her RDP filed or will file a 2007 U.S. Income Tax Return, were you, or will you be claimed on exemption by either or both of your parents?		tax ret Yes		as an No
		Do you live with one or both of your parent(s) and/or his/her RDP?		Yes		No
у	our P	answered "No" to questions 1 - 5 and "Yes" to either question 6 or 7, you must provide income and househol ARENT(S)/RDP. Please answer questions for a DEPENDENT student in the sections that follow.				
<u>e</u> tr	xcep y to	answered "No" or "Parent(s) will not file" to question 6, and "No" to question 7, <u>you are a dependent studer</u> <u>t this enrollment fee waiver.</u> You may answer questions as an INDEPENDENT student on the rest of this app get your PARENT information and file a FAFSA so you may be considered for other student aid. You cannot g it your parent(s') information.	olicati	ion, b	ut pl	ease
ME		A ENROLLMENT FEE WAIVER				
	8.	Are you (the student ONLY) currently receiving monthly cash assistance for yourself or any dependents from: TANF/CalWORKs? SSI/SSP (Supplemental Security Income/State Supplemental Program)? General Assistance?		Yes Yes Yes		No No No
	9.	If you are a dependent student, are your parent(s)/RDP receiving monthly cash assistance from TANF/CalWOR primary source of income?		SSI/S Yes		as a No
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• If you answered "Yes" to question 8 or 9 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

- 10. DEPENDENT STUDENT: How many persons are in your parent(s)/RDP household? (Include yourself, your parent(s)/RDP, and anyone who lives with your parent(s)/RDP and receives more than 50% of their support from your parents/RDP, now and through June 30, 2009.)
- 11. **INDEPENDENT STUDENT:** How many persons are in your household? (Include yourself, your spouse/RDP, and anyone who lives with you and receives more than 50% of their support from you, now and through June 30, 2009.)

12. 2007 Income Information

		DEPENDENT STUDENT: PARENT(S)/ RDP INCOME	INDEPENDENT STUDENT: STUDENT (& SPOUSE'S/ RDP) INCOME
a.	Adjusted Gross Income (If 2007 U.S. Income Tax 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 2007 that is not		
	included in line (a) above (such as TANF benefits, disability,		
	Social Security, child support).	\$	\$
	TOTAL Income for 2007 (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.

SPECIA	L CLASSIFICATIONS ENROLLMENT FEE WAIVERS							
13.	Do you have certification from the CA Department of Veterans Affairs that you are eligible for a dependent's fee Submit certification.	waive	er? Yes		No			
14.	Do you have certification from the National Guard Adjutant General that you are eligible for a dependent's fee w Submit certification.	aiver'	? Yes		No			
15.	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			
16.	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			
17.	Are you eligible as a dependent of a deceased law enforcement/fire suppression personnel killed in the line of de Submit documentation from the public agency employer of record.	uty?	Yes		No			
	 If you answered "Yes" to any of the questions from 13-17, you are eligible for an ENROLLMENT FEE WAIVER and perhaps other fee waivers or adjustments. Sign the Certification below. Contact the Financial Aid Office if you have questions. 							

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 2007 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.

Applicant's Signature		Date	Parent Signature (Dependent Students	Only)	Date
		California Informa	ation Privacy Act		
information be provided to financia your eligibility for financial aid. The to provide such information will de	al aid applicants who are e Chancellor's Office pol elay and may even prev	e asked to supply information abouticy and the policy of the community rent your receipt of financial assisted assist	ining to oneself. The California Inforr tt themselves. The principal purpose for y college to which you are applying for a tance. This form's information may be n information furnished on this form as i	r requesting information id authorize maintenanc transmitted to other sta	on this form is to determine the of this information. Failure
may be used to verify your identit should ask the financial aid officer	y under record keeping at your college for furthe religion, color, national	systems established prior to Janu er information. The Chancellor's Of origin, gender, age, disability, med	ial aid administrators at the institutions ary 1, 1975. If your college requires y fice and the California community collec lical condition, sexual orientation, dome hich you are applying.	ou to provide an SSN a ges, in compliance with f	and you have questions, you ederal and state laws, do not
		FOR OFFICE	USE ONLY		
BOGFW-A	BOGFW-B	Special Classification		RDP Student	Student is not

BOGFW-A		BOGFW-B		Special Classification		RDP			Student is not
TANF/CalWORKs			Į (Veteran	National Guard Dependent		Student		eligible
GA GA		BOGFW-C	Į (Medal of Honor	9/11 Dependent		Parent		
SSI/SSP			Į,	Dep. of deceased la	aw enforcement/fire personnel				

Comments:

Certified by: _____ Date: _____