

## San Bernardino Valley College Student ALERT! RETURN OF FUNDS REGULATIONS

***There is an important federal law about paying back money if you leave school.***

**If you get a GRANT and then WITHDRAW from all your classes, you will OWE money to the federal program. Here's how it works: According to the day you withdraw, the Financial Aid Office will calculate the part of the grant that you have "earned". If you have been paid more than you "earned", you must pay back the difference. NOTE: If you withdraw after you have earned 60% of your grant, you do not owe any repayment.**

If you receive **LOAN** money and withdraw, you will pay back the money according to the normal rules of the loan program. If you receive **WORK** money and withdraw, you do not owe any repayment. You always get to keep salary you have earned.

***If you are thinking of withdrawing or just leaving...please, think again.***

Immediately see a counselor or advisor and discuss your academic or personal reasons for leaving. Perhaps you can stay but take fewer courses. Maybe there are services (like tutoring or personal support) that will help you stay. Talk to your teachers; see what advice and help they can offer.

***Don't leave unless you must. But if you must, take care of business before you go.***

Begin the withdrawal process in the Admissions Office, AD/SS, Room 100. This office will tell you all about the process and the rules.

Please work with the Financial Aid Office. You can arrange for regular payments with the federal government without losing your student aid eligibility, so it's important to take care of the details before you go. If you leave without taking care of this business and you owe money, the Financial Aid Office will have to put a national HOLD on your student aid eligibility.

Note: Even dropping a class can affect your financial aid eligibility. Check with the Financial Aid Office before dropping.

### **\*8 Steps to Financial Aid\***

1. Student applies on-line at [www.fafsa.ed.gov](http://www.fafsa.ed.gov) or mails the 2006-2007 free application for Federal Student Aid (FAFSA) or Renewal FAFSA to the federal processor.
  - Students must list SBVC on FAFSA. Our federal school code is 001272.
  - This process takes four to six weeks!
2. SBVC receives FAFSA data from federal processor.
  - This information is received electronically as long as SBVC is listed on the application.
  - If you are a new financial aid student, complete a Supplemental Application available in Financial Aid.
  - If you are a new student to SBVC, you must complete an Application for Admission to the college. Contact the Admissions and Records office.
3. Student receives Student Aid Report (SAR).
  - Review SAR for accuracy and keep it for your records.
4. SBVC sends Missing Information letter to student.
  - Once your FAFSA data has been reviewed, required documents will be requested from you. This takes 2-3 weeks from the time the FAFSA data is received and can take longer if you apply past the priority deadline.
5. Student returns requested documents to SBVC.
  - Documents are reviewed for changes and, often, electronic corrections are required.
  - Sometimes additional documents are required and requested.

### **Your financial aid file is complete!**

6. SBVC mails Award Notice to student (or denial letter if not eligible).
7. SBVC disburses financial aid.
  - Financial aid checks are mailed to the address on file in Admissions and Records. Refer to the disbursement schedule mailed with your award letter for specific dates.
8. Student submits a Board of Governors Enrollment Fee Waiver (BOG) application. **(Apply for BOG before you register!)**
  - The BOG helps cover your registration costs.

## California Community Colleges 2006-2007 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](http://www.fafsa.ed.gov) at the Financial Aid Office

**Note:** Students who are exempted 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 this fee waiver. Do not complete this application. You may apply for financial aid by completing the FAFSA.

Name: _____ <small style="display: block; text-align: center; margin-left: 20px;">Last                      First                      Middle Initial</small>	Student ID # _____
Email (if available): _____	Telephone Number: (____) _____
Home Address: _____ <small style="display: block; text-align: center; margin-left: 20px;">Street                      City                      Zip Code</small>	Date of Birth: _____ / _____ / _____
<b>Has the Admissions or the Registrar's Office determined that you are a California resident?</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> 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 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 funded 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 Code? (Answer "Yes" if you or your parent are separated from a Registered Domestic Partner but have **NOT FILED** a Notice of Termination of Domestic Partnership with the California Secretary of State's Office.)  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 or your parent's 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

### DEPENDENCY STATUS

1. Were you born before January 1, 1983?  Yes  No
2. As of today, are you married or in a Registered Domestic Partnership? (Answer "Yes" if you are separated but not divorced or have not filed a termination notice to dissolve partnership.)  Yes  No
3. Do you have children who receive more than half of their support from you, **or** other dependents who live with you (other than your children and spouse/RDP) who receive more than half of their support from you, now and through June 30, 2007?  Yes  No
4. Are you an orphan or a ward of the court, or **were** you a ward of the court until your 18th birthday?  Yes  No
5. Are you a veteran of the U.S. Armed Forces?  Yes  No

• If you answered "Yes" to any of the questions 1 - 5, you are considered an **INDEPENDENT** student for fee waiver purposes and must provide income and household information about yourself (and your spouse or RDP if applicable). Skip to Question #8.

• If you answered "No" to all questions 1 - 5, complete the following questions:

6. If your parent(s) or his/her RDP filed or will file a 2005 U.S. Income Tax Return, were you, or will you be claimed on their tax return as an exemption by either or both of your parents?  Will Not File    Yes    No
7. Do you live with one or both of your parent(s) and/or his/her RDP?  Yes    No

• If you answered "No" to questions 1 - 5 and "Yes" to either question 6 or 7, you must provide income and household information about your PARENT(S)/RDP. Please answer questions for a **DEPENDENT** student in the sections that follow.

• If you answered "No" or "Parent(s) will not file" to question 6, and "No" to question 7, you are a dependent student for all student aid except this fee waiver. You may answer questions as an **INDEPENDENT** student on the rest of this application, but please try to get your PARENT information and file a FAFSA so you may be considered for other student aid. You cannot get other student aid without your parent(s) information.

### METHOD A

8. Are you (the student ONLY) currently receiving monthly cash assistance from:
 

TANF/CalWORKs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SSI/SSP (Supplemental Security Income/State Supplemental Program)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
General Assistance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. If you are a dependent student, are your parent(s)/RDP receiving monthly cash assistance from TANF/CalWORKs or SSI/SSP as a primary source of income?  Yes  No

• If you answered "Yes" to question 8 or 9 you are eligible for a **FEE WAIVER**. Sign the Certification at the end of this form. You are required to show current proof of benefits. Ask the Financial Aid Office for the FAFSA to be eligible for other financial aid opportunities.

**METHOD B**

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, 2007.) \_\_\_\_\_

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, 2007.) \_\_\_\_\_

12. **2005 Income Information**

	DEPENDENT STUDENT: PARENT(S)/ RDP INCOME	INDEPENDENT STUDENT: STUDENT ( & SPOUSE'S/ RDP) INCOME
a. Adjusted Gross Income (If 2005 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 <b>ALL</b> money earned in 2005 that is not included in line (a) above (such as TANF benefits, disability, Social Security, child support).	\$ _____	\$ _____
<b>TOTAL</b> Income for 2005 (Sum of a + b)	\$ _____	\$ _____

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

**SPECIAL CLASSIFICATIONS FEE WAIVERS**

13. Do you have certification from the CA Department of Veterans Affairs that you are eligible for a dependent's fee waiver?  
*Submit certification.*  Yes  No

14. Do you have certification from the National Guard Adjutant General that you are eligible for a dependent's fee waiver?  
*Submit certification.*  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 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 duty?  
*Submit documentation from the public agency employer of record.*  Yes  No

• If you answered "Yes" to any of the questions from 13 - 17, you are eligible for a FEE WAIVER and perhaps other fee waiver/reductions. 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 2005 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 Information Privacy Act**

State and federal laws protect an individual's right to privacy regarding information pertaining to oneself. The California Information 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				
<input type="checkbox"/> BOGFW-A <input type="checkbox"/> TANF/CalWORKs <input type="checkbox"/> GA <input type="checkbox"/> SSI/SSP	<input type="checkbox"/> BOGFW-B _____ <input type="checkbox"/> BOGFW-C	<input type="checkbox"/> Special Classification <input type="checkbox"/> Veteran <input type="checkbox"/> Medal of Honor <input type="checkbox"/> Dep. of deceased law enforcement/fire personnel	<input type="checkbox"/> National Guard Dependent <input type="checkbox"/> 9/11 Dependent	<input type="checkbox"/> RDP <input type="checkbox"/> Student <input type="checkbox"/> Parent
				<input type="checkbox"/> Student is not eligible

Comments: \_\_\_\_\_

Certified by: \_\_\_\_\_ Date: \_\_\_\_\_