## California Community Colleges 2014-15 Board of Governors Fee Waiver Application

This is an application to have your **ENROLLMENT FEES WAIVED**. 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**) or the California Dream Application (for eligible AB 540 students) immediately. The FAFSA is available at www.fafsa.ed.gov and the Dream Application is available at http://www.csac.ca.gov/dream\_act.asp. Contact the Financial Aid Office for more information.

## IMPLEMENTATION OF Assembly Bill 1899: Victims of Trafficking, Domestic Violence and other Serious Crimes

AB 1899, chaptered in September of 2012, provides for a non-resident enrollment fee exemption for "Victims of trafficking, domestic violence and other serious crimes". In addition, the legislation allows these students to apply for and, if eligible, receive financial aid from programs administered by public postsecondary institutions or the state of California. Finally, the legislation provides that enrollment fees shall be waived for these students who apply for and are eligible to receive Board of Governor enrollment fee waivers.

	This <b>FEE WAIVER</b> application is for California residents, eligible AB 540 students, and eligible AB 1899 students, as determined by the Admissions or Registrar's Office. If you have not had your California residency or eligibility status determined by the Admissions or the Registrar, please see one of those offices to obtain the valid determination. Fee waiver eligibility cannot be determined until your status has been verified.				
Has the Admissions or Registrar's Office determined that you are a California resident?					
If no, has the Admissions or Registrar's Office determined that you are eligible for a non-resident tuition exemption as an AB 540 student?  ———————————————————————————————————					
If no, has the Admissions or Registrar's Office determined that you are eligible for a non-resident tuition exemption granted as a result of your immigration status under Section 1101(a)(15)(T)(i) or (ii), or Section1101 (a)(15)(U)(i) or (ii), of Title 8 of the United States Code?					
Name:	Student ID #				
Email (if available):	Telephone Number: ()				
Home Address: Street City Zip Code	Date of Birth:/				
IMPLEMENTATION OF THE CALIFORNIA DOMESTIC PARTNER RIGHT	TS AND RESPONSIBILITIES ACT				
The California Domestic Partner Rights and Responsibilities Act extends 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 <b>you</b> 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.					
Registered Domestic Partnership (RDP), you will be treated as an Independ Enrollment Fee Waiver and will need to provide income and household infor student and your parent is in a Registered Domestic Partnership, you will be	nder Section 297 of the Family Code. If <b>you</b> are in a dent married student to determine eligibility for this rmation for your domestic partner. If you are a dependent e treated the same as a student with married parents and				
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11. If your parent(s) or his/her RDP filed or will file a 2013 U.S. Income Tax Return, were you, or will you be claimed on their tax return				
<ul> <li>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.</li> <li>If you answered "No" to all questions 1 - 10, complete the following questions:</li> </ul>				
10. At any time on or after July 1, 2013, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?  ——————————————————————————————————				
9. At any time on or after July 1, 2013, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?   —————————————————————————————————				
8. At any time on or after July 1, 2013, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless				
7. Are you or were you in legal guardianship as determined by a court in your state of legal residence?  ☐ Yes ☐ No				
6. Are you or were you an emancipated minor as determined by a court in your state of legal residence?  ☐ Yes ☐ No				
5. At any time since you turned age 13, were both your parents deceased, were you in foster care, or were you a dependent or ward of the court?  ———————————————————————————————————				
4. Do you have children who will receive more than half of their support from you between July 1, 2014-June 30, 2015, <b>or</b> other dependents who live with you (other than your children or spouse/RDP) who receive more than half of their support from you, now and through June 30, 2015   ——————————————————————————————————				
3. Are you a veteran of the U.S. Armed Forces <b>or</b> currently serving on active duty for purposes other than training?  ———————————————————————————————————				
2. As of today, are you married <b>or</b> in a Registered Domestic Partnership (RDP)? (Answer "Yes" if you are separated but not divorce or have not filed a termination notice to dissolve partnership.				
1. Were you born before January 1, 1991?				
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 <b>ANY</b> 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.				
DEFENDENCT STATUS				

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• If you answered "No" to questions 1 - 10 and "Yes" to either question 11 or 12, you must provide income and household information about your PARENT(S)/RDP. Please answer questions for a DEPENDENT student in the sections that follow.

☐ Will Not File ☐ Yes ☐ No

☐ Yes ☐ No

as an exemption by either or both of your parents?

12. Do you live with one or both of your parent(s) and/or his/her RDP?

• If you answered "No" or "Parent(s) will not file" to question 11, and "No" to question 12, you are a dependent student for all student aid except this enrollment 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.

13. Are you (the student <b>ONLY</b> ) currently receiving monthly cash	assistance for yourself or any de	pendents from:			
TANF/CalWORKs?		☐ Yes ☐ No			
SSI/SSP (Supplemental Security Income/State Supplemental Security Income/State Security Income/Security Income/	ental Program)?	☐ Yes ☐ No			
General Assistance?		☐ Yes ☐ No			
14. 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?					
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. Submit application and documentation to the financial aid office.					
METHOD B ENROLLMENT FEE WAIVER					
<ul> <li>15. DEPENDENT STUDENT: How many persons are in your paranyone who lives with your parent(s)/RDP and receives more June 30, 2015.)</li> <li>16. INDEPENDENT STUDENT: How many persons are in your holives with you and receives more than 50% of their support from 2013 Income Information.</li> </ul>	than 50% of their support from yourself, you	our parents/RDP, now and through			
17. 2013 Income Information	DEPENDENT STUDENT:	INDEPENDENT STUDENT:			
(Dependent students should not include their income	PARENT(S)/ RDP	STUDENT (& SPOUSE'S/			
information for Q 17 a and b below.)	INCOME ONLY	RDP) INCOME			
a. Adjusted Gross Income (If 2013 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 money</b> received in 2013 that is not included in line (a) above (such as					
disability, child support, military living allowance,					
Workman's Compensation, untaxed pensions).	\$	\$			
TOTAL Income for 2013 (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. Submit application and documentation to the finar	ncial aid office.				
If you do not qualify using Method A or Method B, you should					
California Dream Application (for undocumented AB 540 stud Dream Application is available at http://www.csac.ca.gov/drea					
	,				
CDECIAL CLASSIFICATIONS ENDOLLMENT FOR WAIVEDS					
SPECIAL CLASSIFICATIONS ENROLLMENT FEE WAIVERS	- Affician that was a second both to form	and an analysis of the second second			
18. Do you have certification from the CA Department of Veterar Submit certification.	ns Aπairs that you are eligible for	a dependent's fee walver?			
19. Do you have certification from the National Guard Adjutant G	General that you are eligible for a				
Submit certification.	Hanar ar as a shild of a resinient	☐ 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.  D Yes D 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.  2 Yes  No 22. 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		iled in the line of duty?  ☐ Yes ☐ No			
<ul> <li>If you answered "Yes" to any of the questions from 18-22, perhaps other fee waivers or adjustments. Sign the Certification from 18-22,</li> <li>perhaps other fee waivers or adjustments. Sign the Certification from 18-22,</li> </ul>	you are eligible for an ENROLL ication below. Submit applicat				

CERTII ICATION I OR ALI	LAITEIGANIG.	LAD IIIIO OTATEMEI	II AND GION BELOW		
I hereby swear or affirm, un asked by an authorized of spouse/registered domes realize that any false states repayment of my waiver. I Chancellor's Office of the O	official, I agree to pastic partner and/or ment or failure to give authorize release of	rovide proof of this in my parent's/registere re proof when asked ma f information regarding	formation, which may d domestic partner's ay be cause for the de	y include a copy 2013 U.S. Incom nial, reduction, wit	of my and my ne Tax Return(s). I also thdrawal, and/or
I understand the following i	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 or the California Dream Application, additional financial assistance may be available in the form of Cal Grants, Pell and other grants, work study and other aid.					
	d receive financial a iate degree or trans	assistance if I am enroll fer).	led, either full time or p	art time, in an elig	ible program of study
☐ Financial aid prog	ram information and	d application assistance	is available in the coll	ege financial aid o	office.
Applicant's Signature		Date Pa	arent Signature (Dependo	ent Students Only)	Date
CALIFORNIA INFORMATION F State and federal laws prot Practices Act of 1977 requi about themselves. The pri Chancellor's Office policy a information. Failure to prov information may be transm access to records establish  The officials responsible fo which you are applying for to January 1, 1975. If your your college for further info state laws, do not discrimin orientation, domestic partn financial aid office of the co	ect an individual's rates the following interest the following interest the following interest the policy of the vide such information itted to other state and from information ramaintaining the infinancial aid. The State college requires your mation. The Channate on the basis of ership or any other	formation be provided to equesting information of community college to won will delay and may evagencies and the federal furnished on this form formation contained on SSN may be used to verbut to provide an SSN arcellor's Office and the Crace, religion, color, nailegally protected basis.	o financial aid applicant this form is to determ which you are applying yen prevent your receip al government if require as it pertains to them. This form are the financity your identity under not you have questions, California community cotional origin, gender, agent the store of the store	ts who are asked nine your eligibility for aid authorize of financial assied by law. Individual aid administratecord keeping sy you should ask tolleges, in compliage, disability, med	to supply information y for financial aid. The maintenance of this stance. This form's uals have the right of stors at the institutions to ystems established prior the financial aid officer at ance with federal and dical condition, sexual
FOR OFFICE USE ONLY		r ==		T = = =	T = -
□ BOGFW-A □ TANF/CalWORKs	BOGFW-B	☐ Special Classificat☐ Veteran	ion  National Guard Dependent	RDP Student	Student is not eligible
☐ GA	□ BOGFW-C	☐ Medal of Honor	·	□Parent	
☐ SSI/SSP	- BOGEW-C	iviedal di Honor	→ 9/11 Dependent		

	Dep. of deceased law enforcement/fire personnel	
Comments:		
Certified by:	Date: _	