

GENERAL INFORMATION

Name: _____ Social Security No.: _____ / _____ / _____
Last First M.I.

Email (if available): _____ Phone No.: (_____)

Address: _____

Street	City	State	Zip
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Date of Birth: / / Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed

Has the Admissions or the Registrar's Office determined that you are a California resident? ☐ **Yes** ☐ **No**

Note: Students who are exempted from paying nonresident tuition under Education Code Section 68130.5 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 can still file the **FAFSA** to be evaluated for other aid. Please get a **FAFSA** and complete it.*

DEPENDENCY STATUS

1. Were you born before January 1, 1980? ☐ Yes ☐ No
2. As of today, are you married? (Answer "Yes" if you are separated but not divorced.) ☐ 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) who receive more than half of their support from you? ☐ 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 and must provide income and household information about yourself (and your spouse if you are married). Skip to METHOD A below.**
- **If you answered "No" to all questions 1 - 5, complete the following questions:**
6. If your parent(s) filed or will file a 2002 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? ☐ Yes ☐ No ☐ *Parent(s) won't file*
7. Do you live with one or both of your parent(s)? ☐ 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). Please answer questions for a DEPENDENT student in the sections that follow.**
- **If you answered "No" or "Parent(s) won't 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. Talk to the Financial Aid staff if you think you have special circumstances.**

METHOD A

8. Are you currently receiving monthly cash assistance from: (To be answered by all students, dependent and independent.)
TANF/CalWORKs? ☐ **Yes** ☐ **No** SSI/SSP? ☐ **Yes** ☐ **No** General Assistance? ☐ **Yes** ☐ **No**
9. If you are a dependent student, are your parent(s) receiving TANF/CalWORKs or SSI/SSP as their sole source of income?
☐ **Yes** ☐ **No**
10. Do you have certification from the California Department of Veterans Affairs or the National Guard Adjutant General that you are eligible for a dependent's fee waiver? ☐ **Yes** ☐ **No**
11. Are you eligible as a recipient of the Congressional Medal of Honor or as a child of a recipient, or a dependent of a victim of the September 11, 2001 terrorist attack? ☐ **Yes** ☐ **No**
- If you answered "Yes" to question 8, 9 10 or 11, you are eligible for a FEE WAIVER. Sign the Certification at the end of this form. You are required to show proof of benefits. Ask the Financial Aid Office for instructions.
 - If you answered "No" to all questions (8, 9 10 and 11), continue to Method B.

METHOD B

12. **DEPENDENT STUDENT:** How many persons are in your parent(s)' household? (Include yourself, your parent(s), and anyone who lives with your parent(s) and receives more than 50% of their support from your parents.) _____

13. **INDEPENDENT STUDENT:** How many persons are in your household? (Include yourself, your spouse, and anyone who lives with you and receives more than 50% of their support from you.) _____

**DEPENDENT STUDENT:
PARENT(S) INCOME****INDEPENDENT STUDENT:
STUDENT (AND SPOUSE'S) INCOME**

14. 2002 Income Information:

a. Adjusted Gross Income \$ _____ \$ _____
(If 2002 U.S. Income Tax Return was filed, enter the amount from Form 1040, Line 35; Form 1040A, Line 21; Form 1040EZ, Line 4 or Telefile, Line I.)

b. All Other Income \$ _____ \$ _____
(Include **ALL** money received in 2002 that is not included in line (a) above.)

15. **Total** Income for 2002 (Sum of a. + b.) \$ _____ \$ _____

The Financial Aid Office will review your income and let you know if you qualify for an automatic FEE WAIVER. Even if you do not qualify using this simple method, you should file a FAFSA. Many, many students do not qualify under Method A or B but still qualify for a FEE WAIVER and MORE FINANCIAL AID by filing the FAFSA. The Financial Aid Office will give you forms and information.

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 give proof, which may include a copy of my and/or my parent's 2002 U.S. Income Tax Return.** 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's Signature

(Dependent Students Only)

Date

This application will only waive your fees. Please file an application for additional student aid. To see if you qualify for more aid, complete a FAFSA. The FAFSA is available at the Financial Aid Office or at www.fafsa.ed.gov.

FOR OFFICE USE ONLY

Check one of the following:

Notes

- ☐ BOGFW-A _____
☐ TANF/CalWORKs _____
☐ GA _____
☐ SSI/SSP _____
☐ VET/NG DEP _____
☐ MEDAL of HONOR/ or _____
9/11 DEPENDENT _____
☐ BOGFW-B _____
☐ BOGFW-C _____
☐ Student is not eligible _____

CERTIFIED BY: _____

DATE: _____