

Los Angeles Community College District Nonresident Tuition Fee Waiver Application

NOTE: A separate form must be submitted for each semester

Name:		Student ID #	Date of Birth	
Last	First Middle In	nitial		
Home Address:				
Stree	et and the second s	City		Zip Cod
Email Address:		Teleph	one Number:	
ligibility: Please re	ead carefully and answer	the following questions:		
1. My immigration	status prevents me from estab	blishing residency in the Unite	ed States: [ ] YES	[ ] NO
2 Lam in the Unite	d States under a current "F",	"I" or "M" Vise.	[ ] YES	[ ] NO
2. I uni în the Onite	a blates ander a carrent 1,	J, 01 IVI V ISa.		
STOP now if you a	answered "Yes" to # 2, abov			
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc	<u>e</u> ept in circumstances of documen e information to establish econo	nted severe economic hards	
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES 023 Income	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income Family Size 1	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES 223 Income \$20,385	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income Family Size 1 2	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES 023 Income \$20,385 \$27,465	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income Family Size 1 2 3	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES 20,385 \$20,385 \$27,465 \$34,545	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income Family Size 1 2 3 4	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES 23 Income \$20,385 \$27,465 \$34,545 \$41,625	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income Family Size 1 2 3 4 5	<u>e</u> ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES <b>23 Income</b> \$20,385 \$27,465 \$34,545 \$41,625 \$48,705	hip.
<u>STOP now if you a</u> You are	answered "Yes" to # 2, abov e not eligible for this waiver exc Please submit income ne* is at or below the income Family Size 1 2 3 4 5 6	ept in circumstances of document e information to establish econo levels in the chart below.	nted severe economic hards mic hardship [ ] YES <b>)23 Income</b> \$20,385 \$27,465 \$34,545 \$41,625 \$41,625 \$48,705 \$55,785	hip.

These standards are based upon the federal poverty guidelines, as published each year by the US Department of Health and Human Services. Under Title 5 of the California Code of Regulations, the student or student's family must have a total income in the prior year that is equal to or less than 150% of the U.S. Department of Health and Human Services Poverty Guidelines based on family size.

## APPLICANT CERTIFICATION: PLEASE READ AND SIGN BELOW

I hereby swear or affirm, under penalty of perjury, that all the information on this form is true and complete to the best of my knowledge. If I falsify information on this form, I will be responsible for reimbursing the college for any nonresident tuition fees owed, and I will also be subject to student discipline, up to and including suspension and/or expulsion from the District.

Applicant's Signature	Date	arent Signature (required for dependent students under age 19)	Date				
FOR OFFICE USE ONLY							
Action: [ ] Approved	[ ] Code S053 Entered in [	DEC [] Noted [] E-mailed	Denied [ ]				
Ву:		Date:					

## Instructions

LACCD Board Rule 8100.15 states that "students who are citizens and residents of a foreign country, or who are legally precluded from establishing residency in California, shall be entitled to exemption from nonresident fees on the basis of individual financial need in accordance with regulations adopted by the Chancellor. Such individual exemptions shall not be granted in excess of ten percent (10%) of the District's students who are both citizens and residents of a foreign country in the applicable term. If you meet the eligibility requirements on the *Nonresident Tuition Fee Waiver Affidavit* you may be eligible to receive a nonresident tuition exemption.

This form will be used to determine if you meet the exemption requirements established by this policy. If these guidelines apply, to you please fill out this form and return it to the Admissions and Records Office at your college.