



Los Angeles Community College District  
**Nonresident Tuition Fee Waiver Application**

*NOTE: A separate form must be submitted for each semester*

Term Requested: Term: \_\_\_\_\_ Year \_\_\_\_\_

Name:	Student ID # _____ - _____	Date of Birth: / /
<i>Last</i>	<i>First</i>	<i>Middle Initial</i>

Home Address:
<i>Street</i> <span style="margin-left: 200px;"><i>City</i></span> <span style="float:right;"><i>Zip Code</i></span>

Email Address:	Telephone Number: (    )
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**Eligibility: Please read carefully and answer the following questions:**

- 1. My immigration status prevents me from establishing residency in the United States:  YES  NO
- 2. I am in the United States under a current "F", "J", or "M" Visa:  YES  NO

**STOP now if you answered "Yes" to # 2. above**

*You are not eligible for this waiver except in circumstances of documented severe economic hardship.  
Please submit income information to establish economic hardship*

- 3. My family income\* is at or below the income levels in the chart below.  YES  NO

Family Size	2021 Income
1	\$19,140
2	\$25,860
3	\$32,580
4	\$39,300
5	\$46,020
6	\$52,740
7	\$59,460
8	\$66,180
Each Additional Family Member	\$ 6,720

*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 \_\_\_\_\_ Parent Signature (required for dependent students under age 19) \_\_\_\_\_ Date \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>				
Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Code S053 Entered in DEC	<input type="checkbox"/> Noted _____ <input type="checkbox"/> E-mailed	Denied <input type="checkbox"/>
By: _____	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.