

# 2018-2019 APPLICATION FEE WAIVER APPEAL

## SIGNIFICANT CHANGE IN FINANCIAL CIRCUMSTANCES

If your financial situation, or that of your family's, has significantly changed from 2016, you may request to have your eligibility for an admission applicant fee waiver re-evaluated. To initiate the review process, please complete this form and attach a personal statement detailing the change in income and circumstances. In addition to the personal statement, please provide a copy of a recent pay stub if available, which includes year-to-date earnings. Include other documents as appropriate to support your request.

### REASON FOR CHANGE:

(Check all appropriate boxes)

Person(s) impacted by change (check all that apply):  Student  Spouse  Parent(s)

- Loss/reduction of income  Loss/reduction of Benefits (please specify) \_\_\_\_\_
- Separation/Divorce  Death of Parent/Spouse
- Other (please specify) \_\_\_\_\_

Dates change(s) occurred \_\_\_\_\_

Projected total income & benefits expected to receive in calendar year 2017 \$ \_\_\_\_\_

If you are eligible for one of the following application fee waivers, please check the box below and attach the appropriate documentation.

- Alan Pattee  California Veteran Dependents  Dependent of Victims of September 11, 2001

## CERTIFICATION

I certify that the information provided on this form and attached statement is true, complete, and accurate.

Student Name \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## Certification of United States Citizenship or Immigration Status

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
MI

\_\_\_\_\_  
Campus

### I. If you are not a U.S. citizen, please check one of the following:

- I am a U.S. permanent resident and have a Permanent Resident Card (I-551).
- I am a conditional permanent resident (I-151C).
- I am a non-citizen with an Arrival-Departure Record (I-94 or I-94A) from the United States Citizenship and Immigration Services (USCIS) showing one of the following designations:  
(a) "Refugee," (b) "Asylum Granted," (c) "Parolee," or (d) "Cuban-Haitian Entrant."
- I hold a valid non-immigrant visa. Please state which visa you hold and its expiration date:  
Visa \_\_\_\_\_ Expiration Date \_\_\_\_\_
- I am a citizen of the Freely Associated States (Federated States of Micronesia, the Marshall Islands, or Palau).
- I am a dependent of a non-citizen classified as NATO-1 through NATO-7.
- I am a non-citizen who has been paroled into the U.S. under Section 212(d)(5) of the Immigration and Nationality Act.
- I am a victim (or the dependent of a victim) of human trafficking with a Certification or Eligibility Letter to that effect.
- I am a non-citizen who has been battered or subjected to extreme cruelty in the United States by my spouse or my parent(s) or a member of my spouse or parent's family residing in the same household as me, and I have been approved or have a petition pending which sets forth a prima facie case of eligibility for an immigrant visa under certain provisions of the Immigration and Nationality Act.
- None of the above.

### II. California Residency Exemption

*Check all that apply:*

- I have or will have graduated from a high school in California or have attained a High School Equivalency Certificate issued by the California State GED Office or a Certificate of Proficiency, resulting from the California High School Proficiency Exam.
  - I have or will have attended high school in California for three or more years.
- OR**
- I have attained credits earned in California from a high school equivalent to three or more years of full-time high school course work and attended a combination of elementary, middle, and/or high schools in California for a total of three or more years.
  - I am without legal immigration status and will fill out an affidavit stating that I have filed or will file an application to legalize my immigration status as soon as I am eligible to do so.

**CERTIFICATION - To be read and signed by all individuals completing this form.**

**I certify under penalty of perjury under the laws of the state of California that the information provided by me on this form is true, complete, and accurate.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date