

Los Angeles Community College District Nonresident Tuition Fee Waiver Application NOTE: A separate form must be submitted for each semester

Term Re

			Date of Birth
Home Addre		011	
Street		City	Zip Co
Email Address:		Telephone	Number:
∃ligi bili ty: ſ	Pleaseread carefully and answer the f	following questions:	
1. My imr	nigration status prevents me from establishi	ng residency in the United Sta	ates: [] YES [] NO
2. lamin	the United States under a current 3) 13-10	or ³ 0 'Visa:	[]YES []NO
STOP no	w if you answer H G/ Pl Vtó # 2.above		
	You are not eligible for this waiver except in Please submit income info	n circumstancesof documenteds ormation to establish economic h	
3. My fam	nily income* is at or below the income level	Is in the chart below.	[]YES []NO
	Family Size		ncome
	1	\$	
	2	\$2	
	3	\$	
	4	\$	
	5	\$	
	6	\$ \$	
	8		
	EachAdditional Family Member	\$. 0
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Instructions

LACCD Board Rule