



THE CALIFORNIA STATE UNIVERSITY


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ALLISON G. JONES
Assistant Vice Chancellor
Academic Affairs – Student Academic Support

Code: AA-2003-22
August 1, 2003

To: Vice Presidents/Deans of Student Affairs
Vice Presidents, Academic Affairs

From:

Allison G. Jones 

Subject: Admission Application Fee Waiver Form and Eligibility Tables for 2004-2005

The attached “Request to Waive Admission Application Fee” and income eligibility tables reflect updated criteria to determine eligibility for fee waivers for 2004-2005 pursuant to Section 41800.1(d)(5) of Title 5 of the California Code of Regulations that calls for the waiver of payment of the admission application fee for reason of undue hardship.

The income criteria used to determine eligibility for single independent applicants and independent applicants without dependent children represent the 2003 poverty guidelines established by the U.S. Department of Health and Human Services. For dependent applicants and independent applicants with dependent children, the criteria represent the approximate income at which no contribution would be expected from the parents or the independent student based on the federal need analysis methodology for student financial aid programs for 2004-2005.

The income eligibility table incorporates recent changes to the federal need analysis methodology tables related to state and local taxes and to federal income taxes. These recent changes result in reduced allowances for tax liability of families that result in higher disposable income and a higher available income used to determine the amount of the expected family contribution for financial aid purposes.

Each campus is responsible for printing and distributing the “Request to Waive Admission Application Fee” forms. The form should be printed with the citizenship/immigration status certification on the reverse side. The income eligibility table should not be distributed to prospective applicants.

When an admission application is received without the required fee, the application should be retained by the admission office and a request for payment should be sent to the applicant along with the “Request to Waive Admission Application Fee” form. If the request for fee waiver is denied, the campus should notify the applicant that he or she has up to 30 days to pay the required fee for the admission application to be processed. Applicants applying for admission through CSUMentor are provided an opportunity to apply electronically for a fee waiver with immediate analysis of their eligibility.

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Campuses may, under exceptional circumstances, authorize approval of a request to waive the admission application fee based on additional information provided by the applicant or the parents if family financial circumstances have significantly changed from those which are required to be reported on the fee waiver request. The additional information and the basis for approval should be retained with the fee waiver request.

Questions about the fee waiver eligibility tables or application form may be directed to Ms. Mary L. Robinson, Associate Director, Academic Affairs, Student Academic Support, at (562) 951-4737, or e-mail mlrobinson@calstate.edu.

AGJ:MLR

Attachments

cc: Dr. David S. Spence
Mr. Richard P. West
Dr. Gary Hammerstrom
Mr. J. Leon Washington
Presidents
Deans/Directors, Admission and Records
Directors of Financial Aid

OFFICE USE ONLY

Approved
 Denied Date _____

By _____

2004-2005

Request to Waive Admission Application Fee

The California State University

Campus to which you are submitting this form:

Please Print:

Applicant's Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip Code _____

Social Security Number

Telephone Number () _____

The \$55 admission application fee may be waived if you meet the eligibility standards based on the information provided on this form.

Section A

To Be Completed by All Applicants

Are you a California resident? Yes No
 Are you a U.S. citizen? Yes No

If you are not a California resident, you are not eligible for a fee waiver.
If you are not a U.S. citizen, you must complete the reverse side of this form before your eligibility for a fee waiver can be determined.

Incomplete responses will delay processing and may be cause for denial of this request.

Section B

To All Applicants

If you satisfy one of the following conditions, complete Sections C and E and skip Section D.

- You were born **before** January 1, 1981
- You are a veteran of the U.S. Armed Forces
- You are an orphan or ward of the court or were until age 18
- You are married
- You have dependents other than a spouse
- You will be enrolled in a graduate degree program

If you do not satisfy any of the above conditions, complete Sections D and E.

Section C

Financial Information from Applicant

Total size of your household in 2004-2005 _____
(include yourself, your spouse if you are married, and any other legal dependents—including children—who are living with you)

Number of dependent children living with you _____

Applicant's (and, if married, spouse's) total 2003 income from all sources other than financial aid \$ _____
(include earnings from work and benefits such as TANF, veterans benefits, etc.)

Section D

Financial Information from Applicant's Parents

If all answers in Section B are "No," applicant's parents must complete this section and sign the Certification in Section E.

Total size of parents' household in 2004-2005 _____
(include applicant, parents, other dependent children, and other dependents)

a. Parents' Adjusted Gross Income (AGI) for 2003 \$ _____
 b. Parents' untaxed income and benefits for 2003 \$ _____
Total (a + b) \$ _____

Additional information in support of my request for waiver of the \$55 application fee: _____

Section E

Certification

I (we) certify that all information reported on this application is true, complete, and accurate to the best of my (our) knowledge.

Applicant's Signature _____ Date _____

Father's Signature _____ Date _____ Mother's Signature _____ Date _____

Father's Name (please print) _____ Mother's Name (please print) _____

If you completed the information in Section D, at least one of your parents must also sign this form.
 When you have completed and signed this "Request," send it to the Office of Admissions at the campus to which you are applying.

Certification of United States Citizenship or Immigration Status

Last Name	First Name	MI	Campus
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I am a U.S. citizen. Yes No

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

- I am a U.S. permanent resident and have an Alien Registration Receipt Card (I-151 or I-551).
- I am a conditional permanent resident (I-151C).
- I am a noncitizen with an Arrival-Departure Record (I-94) from the U. S. Immigration and Naturalization Service showing one of the following designations: (a) "Refugee," (b) "Asylum Granted," (c) "Indefinite Parole," and/or "Humanitarian Parole," or (d) "Cuban-Haitian Entrant."
- I hold a valid nonimmigrant 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 noncitizen classified as NATO-1 through NATO-7.
- I am a noncitizen who has been paroled into the U.S. under Section 212(d)(5) of the Immigration and Nationality Act.
- I am a noncitizen 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.

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

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

Signed at: _____

City and County	Signature	Date
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