

**PASADENA CITY COLLEGE**  
**2008-2009**  
**Board of Governors Enrollment**  
**Fee Waiver Application**

**Summer 2008, Fall 2008**  
**Winter 2009 and Spring 2009**

Office of Scholarships & Financial Aid  
1570 E. Colorado Boulevard, Bldg., L114  
Pasadena, CA 91106  
(626) 585-7401 FAX: (626) 585-7936  
[www.pasadena.edu](http://www.pasadena.edu)

### **Fee Waiver Eligibility**

The registration Fee Waiver program is also called a BOGW, which stands for Board of Governors Fee Waiver. The fee waiver was developed by the California Community College system to help California residents pay enrollment fees.

#### **Do Not Use Pencil or Red Ink to Fill Out Your Application**

- In order to process your Fee Waiver, you must be admitted to PCC.
- High school students do not need to use the Fee Waiver Application. See the Admissions Office about the High School Student Fee Waiver Program.
- The Fee Waiver is for California residents only. International students and non-residents are not eligible.
- Make sure your application is neat and clearly printed.
- The BOGW is not an entitlement. The information you give on this application is subject to random verification. Applicants are required to comply with all requests for additional information. We will notify you if the application is incomplete or requires additional information. At the discretion of the Office of Scholarships & Financial Aid, your fee waiver request may be denied.

#### **There Are Two (2) Ways to Apply for a Fee Waiver**

**1.** Complete and submit the Fee Waiver Application. This application is for students or families who meet the state income requirements. If you or your parents are receiving TANF, SSI, or General Relief, you qualify for the Fee Waiver. Certain dependents of California veterans may also qualify. If you do not meet the state requirement, don't panic! You can use the next option.

**2.** Complete and submit the Free Application for Federal Student Aid (FAFSA). The PCC school code is **001261**. Apply online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). PCC will receive notice of your FAFSA results.

There is no grace period for payment of the health or Associated Student Representation fee. **These fees must be paid immediately after registration.** They are not covered by the fee waiver. On-line and telephone registration require payment of these fees with a credit or debit card. Fees paid by cash or check must be paid at the Cashier's Office, L-113.

For all other educational expenses, all students are encouraged to complete a FAFSA.

Refunds: Enrollment fee refunds are available to eligible Fee Waiver recipients. If you paid your registration fees and receive a Fee Waiver approval, you can request a refund from the Cashier's Office, L113. Refund requests are accepted through the established PCC Refund deadlines. Students are responsible for applying to PCC for any applicable refunds before the published deadline date.

The Fee Waiver program is subject to legislative change without prior notice.



**Pasadena City College  
Office of Scholarships & Financial Aid**

<i>Office Use Only</i>		
<input type="checkbox"/> BOG A	<input type="checkbox"/> BOG B	<input type="checkbox"/> BOG C
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	
Authorized by: _____		

**General Information** *(please print clearly and use blue or black ink)*

**1. Do not complete this BOG Fee Waiver Application if you filed a 2008-09 Free Application for Federal Student Aid (FAFSA) for PCC or another school (see staff for details); you will be considered for a BOGG Waiver automatically.**

**Note:** Students who are exempt from paying nonresident tuition under **Educational Code Section 68130.5 (AB540)** are NOT California residents. If you are NOT a California resident, you are not eligible for a fee waiver. Do not complete this application. You may apply for financial aid by completing the FAFSA.

**2. Name** \_\_\_\_\_  
Last
First
M.I.

**3. Social Security #:**    -   -

**4. Are you a legal California Resident?** (as determined by Admissions Office):  **Yes**  **No**

**If No, Do not complete this application. You are not eligible for a fee waiver.**

**5. Date of Birth:**  month  day  year

**6. Marital Status** (check one):  (Single, Divorced, Widowed)  (Married)  (Separated)  
 (\*Registered Domestic Partnership)

**Dependency Status**

1. Were you born before January 1, 1985?  **Yes**  **No**
  2. Are you a veteran of the U.S. Armed Forces?  **Yes**  **No**
  3. Are you married?  **Yes**  **No**
  4. Are you an orphan, or **were** you a ward of the court until your 18th birthday?  **Yes**  **No**
  5. Do you have legal dependents other than spouse who live with you or receive more than half their support from you through 6/30/09?  **Yes**  **No**
  6. Do you have a bachelor's or higher degree?  **Yes**  **No**
- If you answered **YES** to any of the above questions, you are an **INDEPENDENT** student and must provide your (and/or your spouse's) 2007 income and household information. Go to **Method A** on the next page.
- If you answered "**NO**" to all the above questions, go to questions 7 and 8:
7. Were you or will you be claimed as an exemption on your parent(s) 2007 Federal tax form?  
 **Yes**  **No**  **Parent(s) won't file a Tax Return**
  8. Do you live with one or both of your parent(s)?  **Yes**  **No**

\*If you are in a Registered Domestic Partnership, for this Fee Waiver you are treated as an Independent student. Dependent students with a parent in a Registered Domestic Partnership are treated the same as a student with married parents. In both cases, the domestic partner's income and household information is required. (CA ASB205)

➤ If you answered "**No**" to questions 1-6 and "**Yes**" to question 7 or 8, you are **DEPENDENT**. Go to **Method B** or complete the Free Application for Federal Student Aid (**FAFSA**).

- If you answered “No” or “Parent(s) won’t file” to question 7, and “No” to question 8, you won’t need your parent’s information for this fee waiver. However, we recommend you complete the **FAFSA**, and you will need to provide your parent’s information on the FAFSA.

**Method A**

9. Are you or your parents currently receiving monthly cash assistance from:
- 1) TANF/CalWORKs?  Yes  No                      2) SSI/SSP?  Yes  No
- 3) General Relief?  Yes  No
10. Do you have a Dependent Fee Waiver from the California Dept. of Veterans Affairs, National Guard Adjutant General or California State Medal of Honor?  Yes  No
11. Are you eligible as a dependent of a deceased law enforcement /fire suppression personnel killed in the line of duty?  Yes  No
12. Are you eligible as a dependent (surviving spouse and children) of deceased victims of September 11, 2001 terrorist attack?  Yes  No

If you answered “Yes” to questions 9 or 10, you must provide verification from the agency listed above. Sign the BOGG Fee Waiver Certification and submit it to the Office of Scholarships and Financial Aid. If you answered “No,” continue to Method B or complete the **FAFSA**.

**Method B**

**Dependent Student:** how many persons are in your parent’s household? \_\_\_\_ (Include yourself, your parents and anyone who lives with and receives more than half of their support from your parents.)

**Independent Student:** how many persons are in your household? \_\_\_\_ (Include yourself, spouse and anyone who lives with and receives more than half of their support from you.)

***Annual Income Amount***

	<u>Dependent</u>	<u>Independent</u>
<b>A. 2007 Adjusted Gross Income</b> (Federal form 1040 line 37, 1040A line 21, 1040EZ line 4, Telefile line 1 or K(2))	\$ _____	\$ _____
<b>B. All Other Income</b> (Include ALL money received in 2007 that is not included on line A)	\$ _____	\$ _____
<b>C. Total A and B</b>	\$ _____	\$ _____

**Income Certification:** Briefly explain the circumstances that provided the  Student (and spouse’s) or  Parent(s) source of support during the last tax year (2007). Note: blank or zero earned income will not be processed.

---



---

**Fee Waiver approval is not automatic.** You must qualify for this benefit. See the first page of this form for more information about fee waiver eligibility requirements.

**Certification**

I hereby certify, under penalty of perjury, that all information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof, which may include, but not limited to, a copy of my and/or parent’s 2007 Federal tax form. I understand that if I am not a resident of California, I am not eligible for the Board of Governors Fee Waiver. I also realize that any false statement or failure to give proof when asked may be cause for denial, reduction, withdrawal and/or repayment of all applicable registration fees owed the college. I authorize release of information regarding this application between the college, the college district, and the Chancellor’s Office of the California Community Colleges. I also authorize release of this information to the University of California and/or the California State University for the purpose of providing me with information about transfer opportunities.

---

Applicant’s Signature	Date	Parent’s Signature	Date
-----------------------	------	--------------------	------