



Los Angeles Community College District
Nonresident Tuition Fee Waiver Application

Note: a separate form must be submitted for each semester

Term Requested: _____ Year: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Student ID #: _____ Date of Birth: _____

Home Address: _____ City: _____

ZIP Code: _____ Email Address: _____

Phone Number: _____

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 | 2024 Income |
|-------------------------------|-------------|
| 1 | \$21,870 |
| 2 | \$29,580 |
| 3 | \$37,290 |
| 4 | \$45,000 |
| 5 | \$52,710 |
| 6 | \$60,420 |
| 7 | \$68,130 |
| 8 | \$75,840 |
| Each Additional Family Member | \$7,710 |

*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: _____

FOR OFFICE USE ONLY

Action: Approved Noted _____ Emailed Denied

By: _____ Date: _____

Instructions

LACCD Board Policy 5020 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.” 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.