Any identification provided on this form is maintained for student records purposes and for reporting to state and federal agencies. For financial aid and tax reporting purposes you must provide your social security number, your major and your anticipated graduation date. For more information, see the Cerritos College Catalog under Admissions Policy.

Please answer the questions as they pertain to the beginning of the semester for which you are applying. Please complete in ink.

1. Legal Name

Last       First       Middle       Prior

2. Social Security Number _______ - _______ - _______  Cerritos College I.D. number _______

Have you ever been employed by Cerritos College?  □ Yes  □ No

3. Gender (please check one) _______ Male (1) _______ Female (2)

4. Birthdate _____ / _____ / _____  Age ______  *students under the age of 18 and not a high school graduate must submit a Special Admit Minor form with application

5. Place of Birth:

City               State or County

6. Citizenship (proof may be required). Please check the appropriate number:

□ 1. U.S. citizen, by birth or naturalization (naturalization date): _____ / _____ / _____

□ 2. Not a U.S. citizen, hold permanent resident visa, date issued: _____ / _____ / _____

□ 3. Not a U.S. citizen, amnesty recipient, date issued: _____ / _____ / _____

□ 4. Not a U.S. citizen, but a refugee, parolee or asylee, date issued: _____ / _____ / _____

□ 5. Not a U.S. citizen, hold a student visa (F-1, M-1, J-1 or J-2).

□ 6. Other, not a U.S. citizen, hold other visa or visa type unknown.

7. Telephone number, including area code (_____ ) _____ - _______

8. Email address, please enter here: __________________________

Note: Reliable internet access and email address are REQUIRED for online classes.

9. Ethnic Background (please check appropriate box) The data gathered is used for state and federal reporting purposes. This question is voluntary and will not be used to discriminate for admission to the College.


10. Address while attending Cerritos College (No PO Boxes, please)

<table>
<thead>
<tr>
<th>Number</th>
<th>Street</th>
<th>Apt#</th>
<th>City</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

11. Mailing address, if different from above (PO Box ok)

<table>
<thead>
<tr>
<th>Number</th>
<th>Street</th>
<th>Apt#</th>
<th>City</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

12. Semester applying for: □ Spring  □ Summer  □ Fall  Year: 20____

(Check one - one application per semester.)
13. Please enter your major area of study. If “undecided” enter “undecided”.

Enter program title here: ________________________________

Required

Please mark the type of classes you plan to enroll in:

☐ Credit Classes  ☐ Non-Credit Adult Education
☐ Special Programs (e.g. Nursing, Court Reporting, Physical Therapist Assistant, Teacher TRAC, etc…)

14. Enrollment Status:

☐ 1. Currently enrolled in grade K-12
☐ 2. New (never attended any college)
☐ 3. New Transfer (attended college but not Cerritos)
☐ 4. Returning (attend Cerritos, but not last semester)
☐ 5. Returning Transfer (attend Cerritos but attended another college)
☐ 6. Continuing (currently enrolled or attended Cerritos last semester)

15. Last high school attended?

☐ Artesia (4582)  ☐ Bellflower (4612)  ☐ Centennial (4898)  ☐ Cerritos (4581)
☐ Columbus (4646)  ☐ Downey (4647)  ☐ El Camino (4840)  ☐ Gahr (4585)
☐ John Glenn (4836)  ☐ La Mirada (4837)  ☐ Mayfair (4613)  ☐ Norwalk (4839)
☐ Somerset (4614)  ☐ St. John Bosco (2612)  ☐ St. Joseph (2593)  ☐ St. Matthias (2611)
☐ Tracy (4583)  ☐ Valley Christian (2578)  ☐ Warren (4648)  ☐ Whitney (4584)

______________ Year of Graduation (mm/dd/yy)

Name and location of high school if not listed above.

Name     City     Co.    State

16. Last college or university attended? If you received a diploma, certificate or degree, what year did you receive it? __________ If none, please enter last year attended __________ (year)

☐ Compton (2051)  ☐ Cypress (2091)  ☐ LA Mission (2064)
☐ El Camino (2052)  ☐ Fullerton (2092)  ☐ LA Trade Tech (2060)
☐ LA Pierce (2058)  ☐ LA Southwest (2059)  ☐ Long Beach City (2070)
☐ LA Valley (2061)  ☐ Orange Coast (2095)  ☐ Rio Hondo (2067)
☐ Mt. SAC (2065)  ☐ Santa Monica (2072)  ☐ CSU Dominguez Hills (1917)
☐ Santa Ana (2098)  ☐ CSU Long Beach (1920)  ☐ CSU Los Angeles (1810)
☐ CSU Fullerton (1945)  ☐ UC Los Angeles (1810)  ☐ UC Riverside (1833)
☐ UC Irvine (1826)  ☐ Biola (280)  ☐ USC (879)
☐ Azusa Pacific (264)  ☐ East Los Angeles (2053)
☐ Whittier (884)  _______________ Office use only

Name and location of college or university, if not listed above.

Name     City     Co.    State

List all other colleges attended:

Name     City     Co.    State

Name     City     Co.    State

17. Are you comfortable reading and writing English?  ☐ Yes  ☐ No
18. What is your highest level of education? (SB11)
- 000 No longer in high school and not a high school graduate
- 100 Currently enrolled in K-12
- 200 Currently enrolled in Adult School
- 300 Received a high school diploma
- 400 Passed the GED, or received high school certificate or equivalency
- 500 Passed the C.H.S.P.E.
- 600 Received foreign secondary school diploma/certificate
- 700 Received an Associate’s Degree
- 800 Received a Bachelor’s Degree or higher
- XXX None

For the above question, what year did you receive the diploma, certificate or degree?
If none, enter the last year attended. ____________ (year)

19. What is your immediate educational goal? (SB14)
- 1. Obtain an A.A. degree and transfer to a 4-year institution
- 2. Transfer to a 4-year institution without an A.A. degree
- 3. Obtain a 2-year associate’s degree without transfer
- 4. Obtain a 2-year vocational degree without transfer
- 5. Earn a vocational certificate without transfer
- 6. Discover/formulate career interests, plans, goals
- 7. Prepare for a new career (acquire job skills)
- 8. Advance in current job/career (update job skills)
- 9. Maintain certificate or license (e.g. nursing, real estate)
- 10. Educational development (intellectual, cultural)
- 11. Improve basic skills in English, reading or math
- 12. Complete credits for high school diploma or GED
- 13. Undecided
- 14. Non-Credit to Credit
- 15. 4 Yr College Student Requirements

Military Status- (Only completed by active military persons, veterans discharged within the last year, or dependents of active duty personnel)

20. Will you be on active duty in the armed services stationed in California on the opening day of the semester in which you plan to enroll?  
- Yes  
- No  
If yes, when did your current duty in California begin? ________________________________

21. Is California indicated on your last Leave and Earnings Statement?  
- Yes, submit your last LES  
- No

22. Were you discharged from the armed services within the last year?  
- Yes, date of discharge ________________  
- No, submit DD214

23. Are you the dependent or spouse of a person on active duty in the armed services stationed in California at the start of the term in which you plan to enroll?  
- Yes  
- No

24. If yes, when did his/her current duty in California begin? ____________ proof of dependent identification card required.

25. Did you attend a California high school for three years and earn a diploma or equivalent?  
- Yes  
- No

26. What was your G.P.A. in high school?  
- A (4.0)  
- B (3.0+)  
- B (2.5-2.9)  
- C (2.0+)  
- Below 2.0

27. What are your parents’ highest levels of education?
- 8th grade or less  
- Mother  
- Father  
- high school graduate  
- Mother  
- Father  
- A.A. degree  
- Mother  
- Father  
- M.A. or Doctorate  
- Mother  
- Father  
- some high school  
- Mother  
- Father  
- college, no degree  
- Mother  
- Father  
- B.A. degree  
- Mother  
- Father  
- I don’t know  
- Mother  
- Father

28. How many people do you support (provide more than half of their housing, food, and expenses)? Please include yourself in the count.  
- none, I’m supported by family/spouse  
- only me  
- two, including me  
- three, including me  
- four, including me  
- five or more, including me
Residency Questionnaire
To Be Completed by All Students

Legal Name

Social Security Number

Part 1—State laws regulate admission of students on the basis of legal residence. This statement is a certification necessary to administer the laws. If additional information is needed to determine your residence status, you will be required to complete a supplemental residence questionnaire and/or to present evidence in accordance with the Educational Code Sections 68040 et. seq. The burden of proof to clearly demonstrate both physical presence in California and intent to establish California residence lies with the student.

29. Where have you resided the past 24 months?

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State  MM/DD/YY</td>
</tr>
<tr>
<td>City</td>
<td>State  MM/DD/YY</td>
</tr>
<tr>
<td>City</td>
<td>State  MM/DD/YY</td>
</tr>
</tbody>
</table>

Complete questions 30-36 about you. If you are unmarried and under 19 years of age, complete about your parents.

30. Filed personal state income tax to another state?
   - No
   - Yes
   If yes, what year?

31. Voted in another state?
   - No
   - Yes

32. Attended an out-of state educational institution as a resident of that state?
   - No
   - Yes

33. Declared residency in another state for income tax purposes?
   - No
   - Yes

34. Petitioned for divorce in another state?
   - No
   - Yes

35. Possessed a valid driver’s license in another state?
   - No
   - Yes

36. Registered a vehicle in another state?
   - No
   - Yes

37. Please estimate the number of hours per week you work during the semester.
   - N=not employed
   - A=1-9 hrs
   - B=10-19 hrs
   - C=20-29 hrs
   - D=30-39 hrs
   - E=40+ hrs

38. Are you a displaced homemaker?
   - No
   - Yes

39. Are you receiving benefits from?
   - AFDC
   - TANF
   - GA/GR
   - JTPA
   - SSI

40. I am a Tech-Prep Student
   - No
   - Yes

41. Total household income in the previous year:
   - 7,500 or less
   - 7,501-15,000
   - 15,001-17,000
   - 17,001 or more

42. Restricted Student Services: Do you wish information regarding disability accommodations?
   - No
   - Yes

43. Are you interested in receiving information regarding financial aid?
   - No
   - Yes

44. Would you like to be contacted for services for former foster youth?
   - No
   - Yes

Part 2—If you are under 19 years of age when classes begin—Complete the Following:

Give names and permanent legal residence for the following persons. If deceased, enter the word “deceased.” SHOW ADDRESSES TO COVER AT LEAST 2 YEARS

Use legal/permanent address, DO NOT USE A PO BOX.

Father’s name

Current Address

Previous Address

Mother’s name

Current Address

Previous Address

Your Current Address

Previous Address

US Citizen

Since (mm/dd/yy)

Since (mm/dd/yy)

Since (mm/dd/yy)

Since (mm/dd/yy)

Since (mm/dd/yy)

**Cerritos College maintains directory information which consists of but is not limited to: student name, major field of study, dates of attendance, degrees and awards received.

Yes, release directory information

No, do not release directory information

I certify that the statements made in this application are true and complete to the best of my knowledge. I understand that falsification, withholding pertinent data, or failure to report changes in residence, may result in my dismissal.

Student’s Signature

Date

Admissions and Records 10/08
DO YOU NEED MONEY FOR COLLEGE?

IT’S NOT TOO LATE TO APPLY FOR FINANCIAL AID

It’s easier than you think and our staff is ready to assist you with the process.

The Board of Governors Fee Waiver is available to pay for your enrollment fee and student activity fee. Grants, scholarships and loans are also available to assist with books, supplies, transportation and other college related expenses.

Eligibility criteria changes each year, so even if you weren’t eligible in the past, you may be eligible now.

FINANCIAL AID OFFICE
Located in the Administration Building
(562) 860-2451, ext. 2397
FAX: (562) 467-5035
www.cerritos.edu/finaid

APPLY ONLINE AT WWW.FAFSA.ED.GOV
FEDERAL SCHOOL CODE FOR CERRITOS COLLEGE: 001161
THE FINANCIAL AID APPLICATION PROCESS
Students must reapply for each academic year.

1. Student Submits Paper FAFSA
2. Student Submits FAFSA on the Web www.fafsa.ed.gov
3. FAFSA is processed by Federal Processor AND Student Aid Report is mailed or e-mailed to student.
4. Cerritos College mails Missing Information Letter to student listing documents required to complete financial aid file AND Student can view requested items on MyCerritos; click on To Do’s.
5. Student may download the requested forms at www.cerritos.edu/finaid/forms.html.
6. Student completes file by submitting requested items in person, by mail, fax, or drop-box to the Financial Aid Office.
7. Cerritos College Financial Aid Office mails Award Notification Letter.
8. If eligible, students will be offered an advance Pell book voucher to purchase books at the Follett bookstore during the first week of the semester.
9. Cerritos College Financial Aid Office will mail checks for books and other educational expenses approximately 30 days after classes begin (must be enrolled and have applied early).
This is an application to have your ENROLLMENT FEES WAIVED. This FEE WAIVER is for California residents only. If you need money to help with books, supplies, food, rent, transportation and other costs, please complete a FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) immediately. Contact the Financial Aid Office for more information. The FAFSA is available at www.fafsa.ed.gov or at the Financial Aid Office.

Note: Students who are exempt from paying nonresident tuition under Education Code Section 68130.5 (AB 540) 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.

<table>
<thead>
<tr>
<th>Name:</th>
<th>Student ID #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email (if available):</td>
<td>Telephone Number: (______)</td>
</tr>
<tr>
<td>Home Address:</td>
<td>Date of Birth: <em><strong><strong><strong>/</strong></strong></strong></em>/_________</td>
</tr>
</tbody>
</table>

Has the Admissions or Registrar's Office determined that you are a California resident? [ ] Yes [ ] No

IMPLEMENTATION OF THE CALIFORNIA DOMESTIC PARTNER RIGHTS AND RESPONSIBILITIES ACT

The California Domestic Partner Rights and Responsibilities Act extends new rights, benefits, responsibilities and obligations to individuals in domestic partnerships registered with the California Secretary of State under Section 297 of the Family Code. If you are in a Registered Domestic Partnership (RDP), you will be treated as an Independent married student to determine eligibility for this Enrollment Fee Waiver and will need to provide income and household information for your domestic partner. If you are a dependent student and your parent is in a Registered Domestic Partnership, you will be treated the same as a student with married parents and income and household information will be required for the parent's domestic partner.

Note: These provisions apply to state student financial aid ONLY, and not to federal student financial aid.

Are you or your parent in a Registered Domestic Partnership with the California Secretary of State under Section 297 of the Family Code? (Answer “Yes” if you or your parent are separated from a Registered Domestic Partner but have NOT FILED a Notice of Termination of Domestic Partnership with the California Secretary of State's Office.) [ ] Yes [ ] No

If you answered “Yes” to the question above treat the Registered Domestic Partner as a spouse. You are required to include your domestic partner's income and household information or your parent's domestic partner’s income and household information in Questions 3, 6, 7, 8, 9, 10, 11, 12.

Student Marital Status: [ ] Single [ ] Married [ ] Divorced [ ] Separated [ ] Widowed [ ] Registered Domestic Partnership

### DEPENDENCY STATUS

1. Were you born before January 1, 1985? [ ] Yes [ ] No
2. As of today, are you married or in a Registered Domestic Partnership (RDP)? (Answer “Yes” if you are separated but not divorced or have not filed a termination notice to dissolve partnership.) [ ] Yes [ ] No
3. Do you have children who receive more than half of their support from you, or other dependents who live with you (other than your children and spouse/RDP) who receive more than half of their support from you, now and through June 30, 2009? [ ] Yes [ ] No
4. Are (a) both your parents deceased, or (b) are you (or were you until age 18) a ward/dependent of the court? [ ] Yes [ ] No
5. Are you a veteran of the U.S. Armed Forces or currently serving on active duty for purposes other than training? [ ] Yes [ ] No

- If you answered “Yes” to any of the questions 1 - 5, you are considered an INDEPENDENT student for enrollment fee waiver purposes and must provide income and household information about yourself (and your spouse or RDP if applicable). Skip to Question #8.
- If you answered “No” to all questions 1 - 5, complete the following questions:

6. If your parent(s) or his/her RDP filed or will file a 2007 U.S. Income Tax Return, were you, or will you be claimed on their tax return as an exemption by either or both of your parents? [ ] Will Not File [ ] Yes [ ] No
7. Do you live with one or both of your parent(s) and/or his/her RDP? [ ] Yes [ ] No

- If you answered “No” to questions 1 - 5 and “Yes” to either question 6 or 7, you must provide income and household information about your PARENT(S)/RDP. Please answer questions for a DEPENDENT student in the sections that follow. If you answered “No” or "Parent(s) will not file" to question 6, and "No" to question 7, you are a dependent student for all student aid except this enrollment fee waiver. You may answer questions as an INDEPENDENT student on the rest of this application, but please try to get your PARENT information and file a FAFSA so you may be considered for other student aid. You cannot get other student aid without your parent(s') information.

### METHOD A ENROLLMENT FEE WAIVER

8. Are you (the student ONLY) currently receiving monthly cash assistance for yourself or any dependents from: TANF/CalWORKs? [ ] Yes [ ] No
   SSI/SSP (Supplemental Security Income/State Supplemental Program)? [ ] Yes [ ] No
   General Assistance? [ ] Yes [ ] No
9. If you are a dependent student, are your parent(s)/RDP receiving monthly cash assistance from TANF/CalWORKs or SSI/SSP as a primary source of income? [ ] Yes [ ] No

- If you answered "Yes" to question 8 or 9 you are eligible for an ENROLLMENT FEE WAIVER. Sign the Certification at the end of this form. You are required to show current proof of benefits. Complete a FAFSA to be eligible for other financial aid opportunities.
METHOD B ENROLLMENT FEE WAIVER

10. **DEPENDENT STUDENT:** How many persons are in your parent(s)/RDP household? (Include yourself, your parent(s)/RDP, and anyone who lives with your parent(s)/RDP and receives more than 50% of their support from your parents/RDP, now and through June 30, 2009.)

11. **INDEPENDENT STUDENT:** How many persons are in your household? (Include yourself, your spouse/RDP, and anyone who lives with you and receives more than 50% of their support from you, now and through June 30, 2009.)

12. **2007 Income Information**

<table>
<thead>
<tr>
<th></th>
<th>DEPENDENT STUDENT: PARENT(S)/ RDP INCOME</th>
<th>INDEPENDENT STUDENT: STUDENT (&amp; SPOUSE’S/ RDP) INCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Adjusted Gross Income (If 2007 U.S. Income Tax Return was filed, enter the amount from Form 1040, line 37; 1040A, line 21; 1040EZ, line 4).</td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
<tr>
<td>b. All other income (Include ALL money received in 2007 that is not included in line (a) above (such as TANF benefits, disability, Social Security, child support).</td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
<tr>
<td>TOTAL Income for 2007 (Sum of a + b)</td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
</tbody>
</table>

The Financial Aid Office will review your income and let you know if you qualify for an ENROLLMENT FEE WAIVER under Method B. If you do not qualify using this simple method, you should file a FAFSA.

**SPECIAL CLASSIFICATIONS ENROLLMENT FEE WAIVERS**

13. Do you have certification from the CA Department of Veterans Affairs that you are eligible for a dependent’s fee waiver?  
- Submit certification.  
- Yes  
- No

14. Do you have certification from the National Guard Adjutant General that you are eligible for a dependent’s fee waiver?  
- Submit certification.  
- Yes  
- No

15. Are you eligible as a recipient of the Congressional Medal of Honor or as a child of a recipient?  
- Submit documentation from the Department of Veterans Affairs.  
- Yes  
- No

16. Are you eligible as a dependent of a victim of the September 11, 2001, terrorist attack?  
- Submit documentation from the CA Victim Compensation and Government Claims Board.  
- Yes  
- No

17. Are you eligible as a dependent of a deceased law enforcement/fire suppression personnel killed in the line of duty?  
- Submit documentation from the public agency employer of record.  
- Yes  
- No

- If you answered "Yes" to any of the questions from 13-17, you are eligible for an ENROLLMENT FEE WAIVER and perhaps other fee waivers or adjustments. Sign the Certification below. Contact the Financial Aid Office if you have questions.

**CERTIFICATION FOR ALL APPLICANTS: READ THIS STATEMENT AND SIGN BELOW**

I hereby swear or affirm, 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 provide proof of this information, which may include a copy of my and my spouse/registered domestic partner and/or my parent(s)/registered domestic partner's 2007 U.S. Income Tax Return(s). I also realize that any false statement or failure to give proof when asked may be cause for the denial, reduction, withdrawal, and/or repayment of my waiver. I authorize release of information regarding this application between the college, the college district, and the Chancellor's Office of the California Community Colleges.

Applicant's Signature ___________________________ Date: ____________

Parent Signature (Dependent Students Only) ___________________________ Date: ____________

**California Information Privacy Act**

State and federal laws protect an individual's right to privacy regarding information pertaining to oneself. The California Information Practices Act of 1977 requires the following information to be provided to financial aid applicants who are asked to supply information about themselves. The principal purpose for requesting information on this form is to determine your eligibility for financial aid. The Chancellor's Office policy and the policy of the community college to which you are applying for aid authorize maintenance of this information. Failure to provide such information will delay and may even prevent your receipt of financial assistance. This form's information may be transmitted to other state agencies and the federal government if required by law. Individuals have the right of access to records established from information furnished on this form as it pertains to them.

The officials responsible for maintaining the information contained on this form are the financial aid administrators at the institutions to which you are applying for financial aid. The SSN may be used to verify your identity under record keeping systems established prior to January 1, 1975. If your college requires you to provide an SSN and you have questions, you should ask the financial aid officer at your college for further information. The Chancellor's Office and the California community colleges, in compliance with federal and state laws, do not discriminate on the basis of race, religion, color, national origin, gender, age, disability, medical condition, sexual orientation, domestic partnership or any other legally protected basis. Inquiries regarding these policies may be directed to the financial aid office of the college to which you are applying.

**FOR OFFICE USE ONLY**

- BOGFW-A
- TANF/CalWORKs
- GA
- SS/SSP
- BOGFW-B
- Special Classification
- Veteran
- Medal of Honor
- Dep. of deceased law enforcement/fire personnel
- BOGFW-C
- National Guard Dependent
- 9/11 Dependent
- Student
- Parent
- Student is not eligible

Comments: ___________________________ 

Certified by: ___________________________ Date: ____________