



RIO HONDO COLLEGE

CALIFORNIA NONRESIDENT TUITION EXEMPTION REQUEST

(AB540 as amended by Education Code section 68130.5, Effective Jan. 1, 2018)

INSTRUCTIONS

Complete and sign this form to request exemption from nonresident tuition charged to nonresident students. Once determined to be eligible, you will continue to receive the exemption as long as you fulfill eligibility requirements or until the College or University no longer offers this exemption. Applying for this exemption does not alter your responsibility to pay, by the campus deadline, any nonresident tuition and associated fees that may be due before your eligibility is determined.

APPLICATION

I, the undersigned, am applying for the California Nonresident Tuition Exemption at **RIO HONDO COLLEGE** and declare that the following apply to me.

1) Check one box only:

- I have a current nonimmigrant visa (not including a T or U visa) as defined by federal law.
Nonimmigrants have been admitted to the U.S. on a temporary visa and include, but are not limited to, foreign students (holding F visas) and exchange visitors (holding J visas).
- I have a current nonimmigrant visa as defined by federal law and have been granted T or U visa status.
- I do not have a current nonimmigrant visa as defined by federal law.
This includes, among others, U.S. citizens, permanent residents, DACA recipients, and individuals without current or valid immigration status.

2) Select all items that apply to you from each column (must select one (1) from each column):

Column A	Column B
<input type="checkbox"/> I attended a California high school for three (3) years or more.	<input type="checkbox"/> I graduated with a California high school diploma (or expect to graduate and use this exemption in the following year) or have the equivalent (i.e. California-issued GED, CHSPE).
<input type="checkbox"/> I have three (3) or more years of high school coursework and attended a combination of California elementary, secondary, and high school of three (3) years or more.	<input type="checkbox"/> I completed an associate's degree from a California Community College.
<input type="checkbox"/> I attended a combination of California high school, adult school, and community college for the equivalent of three (3) years or more *	<input type="checkbox"/> I completed the minimum requirements at a California Community College for transfer to the California State University (CSU) or the University of California (UC).

* A year's equivalence at a California community college is either a minimum of 24 semester units of credit or 54 quarter units. For noncredit courses, a year's attendance is a minimum of 840 semester hours or 1890 quarter hours. Full-time attendance at a California adult school is a minimum of 420 hours of attendance for each school year.

Please provide information on the schools you attended and referenced above, including the dates you attended and the number of credits or hours obtained:

Name of California School	Type of School (high school, adult school or community college)	City	From (Month/Year)	To (Month/Year)	Number of Credits or Hours

Applicants must submit, as part of this form, official transcripts/attendance records that validate any of the information above as requested by the College, District, or University residence official.

Please see reverse side for more information.



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AFFIDAVIT

By signing this document below, I hereby state that if I am a non-citizen without a current or valid immigration status, I have filed an application to legalize my immigration status or will file an application as soon as I am eligible to do so.

DECLARATION OF TRUE AND ACCURATE INFORMATION

I, the undersigned, declare under penalty of perjury that the information I have provided on this form is true and accurate. I understand that this information will be used to determine my eligibility for the California Nonresident Tuition Exemption. I further understand that if any of the above information is found to be false, I will be liable for payment of all nonresident tuition charges from which I was exempted and may be subject to disciplinary action by the College or University.

PLEASE PRINT:

FULL NAME (as it appears on your student records)	DATE OF BIRTH	RHC STUDENT ID
<div style="display: flex; justify-content: space-between;"> Last Name First M.I. </div>	<div style="border-bottom: 1px solid black; width: 100%; text-align: center;">Month / Day / Year</div>	

SIGNATURE _____ DATE _____

***** RETURN THIS COMPLETED FORM TO THE COLLEGE ADMISSIONS OFFICE *****

******* FOR OFFICE USE ONLY *******

Check if any of the following apply: SB 68 AB 2000 Effective: Fall _____ Spr _____ Sum _____

Processed by _____ Date _____ Comments _____