



HARTNELL COLLEGE

DEPENDENT FEE WAIVER APPLICATION

Human Resources & Equal Employment Opportunity

SECTION I – Employee Information			
Name:		Employee ID:	Classification Title:
Department:		Building#/Room:	Phone:
SECTION II: Dependent Information			
Name:		Student ID:	Email Address:
			Phone Number:
Mailing Address:		Date of Birth: (dependent child only) / / (month/day/year)	

Relationship to employee:

- ☐ Spouse by Marriage
- ☐ Dependent Child (please specify by checking one of the below choices)
- ☐ child or stepchild under age 25 who has never been married
 - ☐ child living with employee in parent-child relationship who is economically dependent upon employee, under age 25 who has never been married
 - ☐ child or stepchild age 25 or above who is incapable of self-support due to a disability the existed prior to age 25
- ☐ Domestic partner (Declaration of Domestic Partnership is filed with the California Secretary of State)

Is the dependent applying for admission at this time?

☐ Yes ☐ No

Has the application been filed?

☐ Yes ☐ No

Is the dependent receiving financial aid?

☐ Yes ☐ No

Student Status:

☐ New Student or ☐ Continuing Student
☐ Undergraduate ☐ Graduate ☐ Credential

Semester: ☐ Fall ☐ Spring ☐ Summer

Year: _____

California Resident? ☐ Yes ☐ No

Course Section	Course Name & #	Days & Times	# of Units	Total Tuition Cost:

SECTION III – EMPLOYEE VERIFICATION AND SIGNATURE

I CERTIFY that the individual named above is my legal spouse, dependent child, or registered domestic partner and that the information provided above is true. I wish to transfer my fee waiver eligibility, as provided in appropriate policy or collective bargaining agreement, to the individual named above. I understand this transfer prohibits my personal use of fee waiver benefits during the period indicated. Further, I understand that my spouse, dependent child or domestic partner is responsible for meeting all registration and payment deadlines and **that I am responsible for** informing the college if any changes in approved fee waiver classes occur.

I understand that courses taken through fee waiver may be subject to taxation and that all students must attach an unofficial transcript showing good academic standing to participate in this program.

Employees are encouraged to submit their form prior to the following dates to ensure fees may be cleared prior to the semester starting. (Fall term by July 15; Spring term by Nov. 15; Summer term by May 1)

Employee Signature

Date

OFFICE USE ONLY	HR Approval:	Date
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