

APPLICATION FOR OREGON BORDER WAIVER

All applicants must provide **at least one** piece of evidence from the list below showing they have resided in the State of Oregon for at least 90 days before the beginning of the term to be eligible for this waiver. If you are **financially dependent** on your parents/legal guardians, then your residency is based on their information. Please include a copy of your parents previous years **federal income tax form** showing you were claimed and a copy of your **parent's supporting documentation** from the list below.

- | | | |
|--|--|---|
| <input type="checkbox"/> Oregon driver's license | <input type="checkbox"/> Rental or lease agreement | <input type="checkbox"/> Closing statement of a home purchase |
| <input type="checkbox"/> Voter's registration card | <input type="checkbox"/> Vehicle registration | |

What quarter do you plan to start?

- Summer 20 _____ Fall 20 _____ Winter 20 _____ Spring 20 _____

PLEASE PRINT

*Social Security # _____ - _____ - _____ Assigned Student ID # _____ - _____ - _____

*Your social security number is confidential and, under a federal law called the Family Educational Rights & Privacy Act, the college will protect it from unauthorized use and/or disclosure. In compliance with state/federal requirements, disclosure may be authorized for the purposes of state or federal financial aid, Hope/Lifetime Learning tax credits, academic transcripts, assessment or accountability research.

Name: _____
Last First M.I.

Address: _____
Street/Mailing Address City State Zip

Phone number: Day () _____ Evening () _____

1. Citizenship:

- U.S. Citizen
- Immigrant/Permanent Resident (**MUST** attach copy of Resident Alien Card)
- Refugee/parolee or conditional entrant (**MUST** attach proof such as copy of I-94 departure card).
- Other (please specify) _____.

2. Are you financially dependent on parents (or legal guardians)? Yes No

If yes, please refer to the textbox at the top of the form for required documents.

Do your parents (or legal guardians) live in the State of Oregon? Yes No

— If yes, how long have they continuously lived in the State of Oregon? _____
Years Months

3. How long have you been an Oregon resident? _____

Only the following counties qualify for the Oregon Border County Waiver. Check which county you live in.

- | | | |
|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Columbia | <input type="checkbox"/> Clackamas | <input type="checkbox"/> Wallowa |
| <input type="checkbox"/> Gilliam | <input type="checkbox"/> Morrow | <input type="checkbox"/> Wasco |
| <input type="checkbox"/> Hood River | <input type="checkbox"/> Sherman | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Multnomah | <input type="checkbox"/> Umatilla | |
| <input type="checkbox"/> Clatsop | <input type="checkbox"/> Union | |

I understand that I must maintain a permanent residence in Oregon to qualify for continued waiver of non-resident tuition. While attending Clark under this agreement, I can not qualify for Washington based Financial Aid such as the Washington State Need Grant. I also understand that the time period which I attend under this agreement will not apply toward the 12 month period required to establish a Washington residency. I understand that moving to Washington would nullify this application.

Student's signature _____ Date _____

FOR OFFICE USE ONLY

- | | |
|--|--|
| <input type="checkbox"/> ELIGIBLE | <input type="checkbox"/> NOT ELIGIBLE |
| <input type="checkbox"/> RES 2, FPS 30 | <input type="checkbox"/> RES 2, FPS 02 |
| <input type="checkbox"/> RES 2, FPS 23 | |
- COMMENTS: _____

PLEASE RETURN TO:

Clark College
Office of Admissions/MS 21
1933 Fort Vancouver Way
Vancouver, WA 98663-3598

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