

Senior Citizen Tuition Waiver Application

Name: _____ Student ID Number: _____

Term: Fall _____ Spring _____ Summer _____
Year Year Year

Senior citizens (age 65 or older) may register in credit courses tuition-free if they meet certain income and residency requirements. Tuition-free registration is available each term beginning on the Monday of the week prior to the week classes begin, subject to available space in courses. Seniors may register at any other time during the registration cycle, but will not qualify for the Senior Citizen Tuition Waiver. **Seniors are responsible for paying all applicable fees, including Out-of-District** and must make payment arrangement for any non-covered tuition and fees at the time of registration. In order to receive a Senior Citizen Tuition Waiver, seniors must submit a signed copy of this form and documentation of age and income to the Business Office at the time of registration.

In accordance with the provisions of the Senior Citizen Courses Act (110 ILCS 990), I certify that I meet the following requirements:

- Age 65 or older (acceptable documentation includes: valid state issued driver's license, state issued ID card, U.S. Passport, birth certificate); and
- Resident of Illinois; (acceptable documentation includes: valid state issued driver's license, state issued ID Card, voter registration card, copy of lease, current utility or home telephone bill); and
- Annual prior calendar year household income* of less than (acceptable documentation includes: prior year federal or state tax return or the prior year Social Security Benefits summary) Household size 200%. Refer to the link below:

<http://familiesusa.org/product/federal-poverty-guidelines>
- Indicate the number of Household Members (spouse and dependent children only): _____
(*Refer to attached Senior Citizen Tuition Waiver Income Guidelines)
- List Household Members (spouse and dependent children only)

Name of Household Member (printed)	Relationship to Student
	Self (student)

I am aware that proof of age, Illinois residency, and annual household income documentation must be submitted with this application. I understand that my application will not be processed without this information.

Student Signature

Date

Senior Citizen Tuition Waiver Income Guidelines

The following sections from P.A. 77-2059 (Senior Citizens and Disabled Persons Property Tax Relief Act) describe the manner in which "household income" is to be determined. Income levels are based on 200% of the federal poverty guidelines per household size for calendar year.

403.05 Household defined

3.05 "Household" means a claimant or claimant and spouse living together in the same residence.

403.06 Household income defined

3.06 "Household income" means the combined income of the members of a household

403.07 Income defined

3.07 "Income" means adjusted gross income, properly reported for federal income tax purposes under the provisions of the Internal Revenue Code, modified by adding thereto the sum of the following amount to the extent deducted or excluded from gross income in the computation of adjusted gross income:

- (A) An amount equal to all amounts paid or accrued as interest or dividends during the taxable year.
- (B) An amount equal to the amount of tax imposed by the Illinois Income Tax Act paid for the taxable year.
- (C) An amount equal to all amounts received during the taxable year as an annuity, under an annuity, endowment or life insurance contract or under any other contract or agreement.
- (D) An amount equal to the amount of benefits paid under the Federal Social Security Act during the taxable year.
- (E) An amount equal to the amount benefits paid under the Railroad Retirement Act during the taxable year.
- (F) An amount equal to the total amount of cash public assistance payments received from any governmental agency during the taxable year other than benefits received pursuant to this Act.
- (G) An amount equal to any net operating loss carryover deduction or capital loss carryover deduction during the taxable year.

"Income" does not include any grant assistance received under the Nursing Home Grant Assistance Act or any distributions or items of income described under subparagraph (X) of paragraph 2 of subsections (a) of Section 203 of the Illinois Income Tax Act.

For Business Office Use Only:

\$ _____ Household Income Verified _____ Illinois Residency Verified _____ Age Verified

\$ _____ Total of Tuition to be Waived _____ Number of Individuals in Household

Date applied to student account: ____/____/_____

Entered By: _____

Note: Please attach a copy of the student's documentation of income, age, and residency to this application and maintain all documents for auditing purposes.