2005-2006 Renewal Application for the
LAW ENFORCEMENT PERSONNEL DEPENDENTS GRANT PROGRAM

SECTION I: STUDENT INFORMATION (Please print or type)

Last Name	First Name	Middle Initial	Social Security Number

Street Address	City	State	Zip Code

Date of Birth	Gender	Telephone Number
	☐ (1) Male ☐ (2) Female	( )

SECTION II: SCHOOL INFORMATION (Please print or type)

Name of the school you will attend during **2005-2006**:

The number of units you have completed to date:

_____ ☐ Semester OR ☐ Quarter Units

Your college educational level for the **2005-2006** academic year will be:

- ☐ (1) Freshman
- ☐ (2) Sophomore
- ☐ (3) Junior
- ☐ (4) Senior/continuing Undergraduate
- ☐ (5) 5th Year Undergraduate
- ☐ (6) Graduate or Professional

Indicated below are the number of units you plan to enroll in each term during the **2005-2006** academic year:

Fall Term _____

Winter Term _____

Spring Term _____

Your living arrangements for the 2005-2006 academic year will be:

☐ (1) with parents ☐ (2) in on campus housing ☐ (3) in off campus housing ☐ (4) with relatives

Are you attending a CSU or UC university and receiving benefits from the Allen Pattee Program for the 2005-2006 academic year?

☐ Yes ☐ No

To be considered for continued participation in the Law Enforcement Personnel Dependents Grant Program, I understand I must submit the following information with this application:

1. **My 2005-2006 Student Aid Report (SAR), which is generated after filing a Free Application for Federal Student Aid.**
2. **A copy of my current transcripts.**

SECTION V: STUDENT'S SIGNATURE OF UNDERSTANDING AND AUTHORIZATION TO RELEASE INFORMATION

By my signature I certify that I understand and agree to the following:

I am not in default on any state or federally insured educational loan and am free of any obligation to repay any state or federal educational grant.

I declare under penalty of the laws of the State of California and of the United States that this form has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the penalty, under Federal or California State Law, for submission of fraudulent or incorrect information on this form, may be repayment of the grant amount received with interest and additional penalties.

I am giving school official(s), and the California Student Aid Commission authorization to release and receive information concerning my application, educational loans, and student records between institutions and appropriate public and private agencies as required to determine my continued eligibility for the Law Enforcement Personnel Dependents Grant Program.

_____ _____

Signature of Applicant Date

L-3R (Rev. 5/05)

PLEASE RETURN IN THE ENCLOSED ENVELOPE AS SOON AS POSSIBLE

CALIFORNIA STUDENT AID COMMISSION