In order to be eligible for the allowance, a student must:

1. Have permanent California residence in a territory not included in any community college district and reside more than 60 miles from the nearest community college attendance center; and,

2. Be under 21 years of age or under 25 years of age and honorably discharged or otherwise returning from active or inactive military service with the armed services of the United States; and,

3. Be enrolled for at least 12 units per term throughout the period of eligibility.

4. Based on a January 17-18 2006 Title 5, California Code of Regulations change by the Board of Governors, if a student combines enrollment at two districts to satisfy the full time enrollment requirement, the claim for reimbursement and payment to the student shall be made by the district where the student is enrolled for the higher number of credit units. If the student is enrolled for an equal number of credit hours at each district, the claim for reimbursement and payment to the student shall be made by the district that is located closer to the student’s home address. The District that submits the claim for reimbursement and makes payment to the student is responsible for verifying all the claimed credit units that serve as the basis for payment. Credit classes offered through distance education that meet the requirements of Title 5 Section 55205 et seq. may be included in establishing full-time enrollment so long as a portion of the credit units taken at each community college district to satisfy the requirements of this section are not taken through distance education.

The period of eligibility includes:

Each calendar day during which the eligible student is enrolled full time in credit classes. Such period includes Saturdays, Sundays, and holidays, but excludes breaks between terms when students are not enrolled.


Form attached - Application for Transportation Maintenance Allowance

Please email sjonas@lassencollege.edu or call the Lassen Community College Admissions & Records Office (530) 251-8808 if you have any questions regarding Maintenance Allowance.
APPLICATION FOR MAINTENANCE ALLOWANCE
LASSEN COMMUNITY COLLEGE
P.O. Box 3000 - Susanville, CA  96130 - Phone: (530) 251-8808

School Year: _______________

NAME: ___________________________________________________________________________________

Last       First     MI

PHONE : (_____ ) - ___________  SSN: _____- _____- _____  OR Student ID: ______________

DATE OF BIRTH: _______________  Age at time this application is turned in: ______________

ADDRESS: _______________________________________________________________________________

Number/Street    City   State  ZIP

Address provided is the one check will be mailed to at the end of the fiscal year.

High School of Graduation or Last Attendance:

NAME of HIGH SCHOOL: __________________________________________________________________________

COUNTY: ___________________________________________________________________________________

DATE of GRADUATION or Last Attendance: _______________

Have you been in the Military Service?  Yes_____   No_______     Years of Service: _________

Date of Separation: _______________  Type of Discharge: ______________

PARENT(s) NAME: _____________________________________________________________________________

PARENT(s) ADDRESS: _______________________________________________________________________

Number/Street   City  County        State   ZIP

PARENT(s) PHONE: (________) ________________________

I give my consent for this information to be released to the County Superintendent of Schools Office at the county of my permanent residence and to the California Community College Chancellor’s Office to be used for verification of residence.  I further declare that the above statements of this form are true and correct to the best of my knowledge.

____________________________________________  _______________________
Signature           Date

Completed form is to be mailed to Lassen Community College, Atten: Admissions & Records, P.O. Box 3000, Susanville, CA  96130
******************************************************************************
OFFICE USE ONLY
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Dates of Full-Time Enrollment:

Fall Semester: ______________________  Spring Semester: ______________________

A&R/10-20-2011        White copy - Office        Yellow Copy - Student