



## Book and Public Transportation Subsidy Application

Student Name \_\_\_\_\_ High School \_\_\_\_\_ Grade \_\_\_\_\_

**PLEASE WRITE LEGIBLY**  
**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

Note: All students who complete and submit this form by **March 19, 2009** will be considered for a book and/or transportation subsidy. Turn this application in to your EAOP Coordinator or directly to the EAOP Office at 2150 Kittredge Street, #3A, Berkeley, CA 94720-1060. Students will be notified by mail if they have been awarded a transportation subsidy by the **3rd week of May, 2009**. In the past, the expected family contribution for students who were awarded a transportation subsidy was \$2 per day.

### EAOP summer program(s) applied to:

- Pre College Academy
- Summer Sessions
- ATDP
- Concurrent Enrollment

*Eligibility Criteria*

A student's eligibility is determined by membership in a family unit whose annual income falls within these guidelines.

Household size	Annual Income
2	\$0 - \$49,800
3	\$49,800 - \$56,050
4	\$56,050 - \$62,300
5	\$62,300- \$67,250
6	\$67,250- \$72,250

- The household size should be the number of dependents plus the individual who filed the family's current tax statement.
- Students who are in foster care are considered a household size of one person.
- Income levels are based on the Unadjusted Area Median Income (AMI) for the Bay Area.

#### More than 6 dependents?

To determine income levels for families with more than six dependents, please add \$6,290 for each additional dependent.

*Parent/Guardian Information*

Person completing this form (check one):

- Mother                       Father                       Step-parent       Grandparent  
 Legal Guardian                       Other (describe) \_\_\_\_\_

Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

*2008 Tax forms*

Please attach a copy of 2008 federal or state tax forms to verify income and expenses. If you haven't completed your 2008 tax forms, you may use your 2007 tax forms. W-2s will not be accepted. Please be sure to **CROSS OUT OR BLACK OUT ALL Social Security Numbers.**

*Transportation*

What form of public transportation will you use to get to the UC Berkeley campus during PCA? **Check ONE only (EAOP will only subsidize one form of transportation).**

\_\_\_\_\_ **BART** Write the name of the BART location where you will board: \_\_\_\_\_

\_\_\_\_\_ **AC Transit**

*Certification*

All of the information on this form is true and complete to the best of my knowledge. I realize that failure to provide accurate information may result in denial of financial assistance to the student.

Parent / Guardian Name \_\_\_\_\_

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_