CAL POLY STATE UNIVERSITY
HUMAN RESOURCES
San Luis Obispo, CA 93407

HR 133e Form

DEPENDENT FEE WAIVER PROGRAM

AFFIDAVIT OF ELIGIBILITY FOR ECONOMICALLY DEPENDENT CHILDREN

In following generally accepted guidelines for transferring a fee waiver benefit to a child (other than natural, adopted, or step-child), this affidavit must be completed by the eligible employee or annuitant attesting to the "parent-child relationship" with the child, including that the child is economically dependent on the employee or annuitant. The child must never have been married and must be under the age of 23 (except for certain disabled dependents). Generally, the parent-child relationship exists when either:

- ► The employee or annuitant has legal custody or joint legal custody of the child; or
- ► The child resides with the employee or annuitant (generally in the absence of the natural or adoptive parent), and is economically dependent upon the employee or annuitant; or
- ► The child is the natural, adopted, step or economically dependent child of the employee or annuitant's Domestic Partner where allowed by collective bargaining agreement.

Employee/Annuitant Information:

Name	Social Security Number
Date Acquired Dependent: / /	

Dependent Information:

Name		Social Security Number
Date of Birth / /	Relationship to Employee/Annuitant	

Certify by checking the appropriate box:

- ❑ I have been granted legal custody or joint legal custody of the dependent named above. A copy of the Court Order is attached.
- ❑ I have a parent-child relationship with the dependent named above, who resides with me and is economically dependent upon me and whose natural or adoptive parent:
  - ❑ does not live in my household
  - ❑ Lives in my household, but cannot fulfill parental responsibilities.
- ❑ I have established financial responsibility for the dependent named above through my domestic partnership. I have assumed the parent-child relationship along with my domestic partner.

I recognize that this affidavit is a legally binding document and accept full responsibility for notifying my Human Resources Office, Fee Waiver Coordinator, immediately if there are any changes pertaining to this child's status as my dependent. I agree to provide supporting documentation, such as, but not limited to, court records, birth certificate, proof of school registration, tax returns, statement of financial liability, or any other documents, when requested by my employer as long as the child is enrolled as my dependent. I hereby certify, under penalty of perjury, that the information provided by me is true and correct to the best of my knowledge.

Employee/Annuitant Signature	/ / Date
Fee Waiver Coordinator Signature	/ / Date