COLLEGE OPPORTUNITY FUND



COLORADO IN-STATE UNDERGRADUATES: APPLICATION FOR STATE OF COLORADO TUITION STIPEND AND AFFIDAVIT

PLEASE PRINT CLEARLY AND COMPLETE ALL SECTIONS. Incomplete applications will be returned.

1. Personal Information: Please p	orovide your Social Security Number or check	the box below	
Social Security Number	-OR-		
Number. If your Social Security	e a Social Security Number, or do not wish to pr Number was obtained through DACA (Deferred provide your Social Security Number above.*		
	llege Opportunity Fund (COF) identification number each college you attend in order to receive this		
Last Name:	First Name:		
Middle Initial:Date of Birth (Must be at least 13 years old):	(MM/DD/YYYY)	
Mailing Address:	City: _		
State: Zip Code:	E-mail Address:		
•	Required		
2. ADDITIONAL INFORMATION:			
	nt applying for COF because I am or will be enrow college) program. CHECK ONLY ONE BOX.	olled in a Concurrent Enrollment	
Yes No			
	ou have completed the application. Please signity Fund as directed at the bottom of this pa		
B. If you answered "No" to 2.A., pl	ease respond to the question below. READ THIS	SECTION CAREFULLY.	
1. I am a US Citizen, Permanent	Resident or otherwise lawfully present in the U	nited States.	
Yes -OR- No			
	You have completed the application. Please signity Fund as directed at the bottom of this pa		
If you answered "No" Please pro	oceed to the next page.		
Signature	Date Sig	ned (MM/DD/YYYY)	
Mail the completed application to:	College Opportunity Fund 1560 Broadway, Suite 1600 Denver, Colorado 80202		
Or fax the completed application to:	(303) 292-1606		

2. Please check the "Yes" box, if, as	expressly allowed l	oy Colorado State Law:	Yes	
 a. I am seeking in-state tuition for at least three years imm -OR- 			ivate high school in Colorado a Colorado high school.	
b. I am seeking in-state tuition for at least three years imm (GED) in Colorado.				
If you checked the box above, please sign and the completed application and affidavit to the				
Signature		Date Signed	(MM/DD/YYYY)	
Mail the completed application and affidavit to:		College Opportunity Fund 1560 Broadway, Suite 1600 Denver, Colorado 80202		
Or fax the completed application and affidavit to: (303) 292-1606				
If you are currently enrolled in high school ar or ASCENT (5th year high school & college) p				
	AFFIDA	VIT		
(REQUIRED <u>ONLY</u> FOR S	STUDENTS WITHO	UT LAWFUL IMMIGRA	NT STATUS)	
Individuals seeking in-state tuition based solely on immediately preceding the date the student either (equivalency diploma (GED) in Colorado, who do order to be considered for in-state tuition pursuant	(1) graduated from a not have lawful imn	Colorado high school; O nigration status, must execute	R (2) completed a general	
I hereby swear or affirm under penalty of perjury u	under the laws of the	e state of Colorado that:		
 I have applied for lawful presence in the I will apply for lawful presence in the Ur 		as I am able to do so.		
I understand that this sworn statement is required by statement or representation in this sworn affidavit second degree pursuant to Colorado Revised Statu	may constitute a vic			
First Name	MI	Last Name		
Signature		Date Signed (A	MM/DD/YYYY)	
Complete name of the Colorado high school where	e you received your	diploma.		
Enter the date you received your diploma from that	at high school:			
OR				
Institution in Colorado where you received your G	ED:			

IMPORTANT ADDITIONAL INFORMATION

- 1. You only have to apply for COF once. You will receive the stipend each term you take eligible undergraduate courses at a college participating in the College Opportunity Fund (COF) and have not exhausted the 145 lifetime credit hours allotted by the state of Colorado when you applied for this state funding.
- 2. If you signed the Affidavit, you only have to complete it once, even if you transfer to another college.
- 3. For privacy purposes, the information you provide on the Stipend Application, will only be available to you and the college you are attending. The college, with your authorization, will use this information to match your COF account to information you have provided the college when a request for payment is made on your behalf, and will be used to help you access your account information if you forget your User ID and/or password.
- **4.** Completing this Stipend Application does not guarantee you admission into a Colorado college or university. You must complete the admission process with the college or university you wish to attend in the state of Colorado.
- 5. Completing this Stipend Application does not make you a Colorado resident, nor does it begin any process to determine Colorado residency. The college or university you attend determines residency. If you have any question about whether you are considered a resident, contact the college or university you wish to attend.
- **6.** Completing this Stipend Application does not automatically make you eligible to receive this state funding. You must meet the requirements listed under the FAQ tab at: http://cof.college-assist.org. Your college or university determines your eligibility for this funding based on those requirements.
- 7. Completing this Stipend Application does not make you eligible for financial aid. You must complete the financial aid process designated by the college or university you wish to attend.
- **8.** Future College Opportunity Fund payments are contingent on an annual appropriation by the Colorado General Assembly.

If you have any questions regarding the College Opportunity Fund or this application please contact us

E-mail: AskCOF@college-assist.org Telephone: (720) 264-8550 OR

(800) 777-2757, if outside the Denver Metro Area.