

Admissions & Financial Aid Office
 PO Box 496006, Redding, CA 96049-6006
 Phone: (530) 242-2650

This form is intended for grade verification only to allow a student to register for the same course next semester. This form is **not** intended to permit course repetition more than allowable.* Students should present this form to their instructor. The completion of this form is not required if an instructor is unable to make a grade determination at this time. It is the student's responsibility to return this form to the Admissions and Records Office.

STUDENT INFORMATION - REQUIRED:		
Student ID#:	Date of Birth:	
First Name:	Last Name:	M.I.
Mailing Address	E-mail Address	

OPTION A: My parent is a seasonal agricultural employee	
Parent First Name:	Parent Last Name:
Parent Address:	
Parent employed by:	
Address of Parent employer:	

Did your parent file state and/or federal income tax returns? Yes No
 If yes, were you claimed as a dependent? Yes No

PROOF REQUIRED: Attach pay stubs showing two months of employment for each of the last two years OR have your employer sign this form; the employer is verifying that the person identified above is hired as a seasonal agricultural employee.

Employer Signature and phone number

*****OR*****

OPTION B: I am a seasonal agricultural employee
Employer Name:
Address of employer:

PROOF REQUIRED: Attach pay stubs showing two months of employment for each of the last two years OR have your employer sign this form; the employer is verifying that the person identified above is hired as a seasonal agricultural employee.

Employer Signature and phone number

I certify that the statements on this form are true and correct. I will notify the college of any changes of facts.

Student Signature

Date