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 provide your Social Security Number or check the box below

Social Security Number __________________________________________________ -OR-

☐ Check this box if you do not have a Social Security Number, or do not wish to provide your Social Security Number. If your Social Security Number was obtained through DACA (Deferred Action for Childhood Arrivals), please check this box and do not provide your Social Security Number above.*

*If you check the above box, a unique College Opportunity Fund (COF) identification number will be assigned to you and you will be required to give this number to each college you attend in order to receive this funding.

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:**

A. I am currently a high school student applying for COF because I am or will be enrolled in a Concurrent Enrollment or ASCENT (5th year high school & college) program. **CHECK ONLY ONE BOX.**

☐ Yes ☐ No

If you answered “Yes” STOP. You have completed the application. Please sign and date this application, and submit it to the College Opportunity Fund as directed at the bottom of this page. **Do not complete the attached Affidavit.**

B. If you answered “No” to 2.A., please respond to the question below. **READ THIS SECTION CAREFULLY.**

1. I am a US Citizen, Permanent Resident or otherwise lawfully present in the United States.

☐ Yes -OR- ☐ No

If you answered “Yes,” STOP. You have completed the application. Please sign and date this application, and submit it to the College Opportunity Fund as directed at the bottom of this page. **Do not complete the attached Affidavit.**

If you answered “No” Please proceed to the next page.

__________________________________________________________
Signature

____________________________________
Date Signed (MM/DD/YYYY)

Mail the completed application to: College Opportunity Fund
1600 Broadway, Suite 2200
Denver, Colorado 80202
2. Please check the “Yes” box, if, as expressly allowed by Colorado State Law:  Yes □

   a. I am seeking in-state tuition because I attended a Colorado high school for at least one year immediately preceding the date I graduated or I was physically present in Colorado for at least one year immediately preceding the date I successfully completed a high school equivalency examination in Colorado; AND

   b. I have been physically present in Colorado for at least 12 consecutive months prior to enrolling in an institution of higher education.

If you checked the box above, please sign and date the application and complete the affidavit below. Please submit the completed application and affidavit to the College Opportunity Fund as directed on this form.

_________________________________________________  ________________________________________
Signature                                             Date Signed (MM/DD/YYYY)

Mail the completed application and affidavit to:
College Opportunity Fund
1600 Broadway, Suite 2200
Denver, Colorado 80202

If you are currently enrolled in high school and applying for COF as part of enrollment in a Concurrent Enrollment or ASCENT (5th year high school & college) program, DO NOT FILL OUT THE AFFIDAVIT BELOW.

**AFFIDAVIT**

*(REQUIRED ONLY FOR STUDENTS WITHOUT LAWFUL IMMIGRANT STATUS)*

An individual seeking classification as an in-state student for tuition purposes only, as set forth above, who does not have lawful immigration status, must execute the following Affidavit to be considered for in-state tuition pursuant to Colorado Revised Statute 23-7-110:

I hereby swear or affirm under penalty of perjury under the laws of the state of Colorado that:

- I have applied for lawful presence in the United States; OR
- I will apply for lawful presence in the United States as soon as I am able to do so.

I understand this sworn statement is required by law. I further acknowledge that making a false, fictitious or fraudulent statement or representation in this sworn affidavit may constitute a violation of the criminal laws of Colorado as perjury in the second degree pursuant to Colorado Revised Statute 18-8-503.

___________________________________________  ________________________________________
First Name    MI    Last Name

_______________________________________  ________________________________________
Signature                                             Date Signed (MM/DD/YYYY)

Complete name of the Colorado high school where you received your diploma.

____________________________________________________________________________________________

Enter the date you received your diploma from that high school:

____________________________________________________________________________________________

**OR**

Institution in Colorado where you received your GED: 

____________________________________________________________________________________________
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 at:

   E-mail: AskCOF@dhe.state.co.us
   Telephone: (720) 264-8550