APPLICATION FOR EXEMPTION FROM
STUDENT HEALTH CENTER FEE
IN COMMUNITY COLLEGES

I hereby request exemption from the payment of any fee for the use of the
student health center or other health services provided in accordance with
section 76355 of the Education Code of the State of California,

I am an adherent of the teachings of a religious sect, denomination, or
organization, and in accord with its teachings depend exclusively upon
prayer for healings. Therefore, I request exemption from the payment of the
fee for health supervision and services provided in Section 76355 of the
Education Code in accord with Section 76355 (c), which reads as
follows:

“(c) the governing board of a district maintaining a community college shall adopt rules
and regulations that exempt the following students from any fee required pursuant to
subdivision (a): (1) students who depend exclusively upon prayer for healing in
accordance with teachings of a bona fide religious sect, denomination, or organization
and (2) students who are attending a community college under an approved
apprenticeship training program.”

Applicant Name  Applicant Signature

Parent or Guardian *(see not below)  Applicant Student ID#

Address  City, State, Zip code

Name & Phone number of Bona Fide Organization

Street, City & State of Organization

* Note: If applicant is 18 years of age or over, signature of parent or guardian is not necessary.

Submit this form to foothillcashiersoffice@foothill.edu, fax this form to (650) 949-7694 or mail to: Foothill College Admissions, 12345 El Monte Rd., Los
Altos Hills, CA 94022

Office use only: Quarter_________, Clerk_______, Date___________

Revised 04/16/20